

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jun 03, 2008
Secretary of State

DOCUMENT# 770733

Entity Name: IGLESIA BAUTISTA HISPANA DE WESTLAND, INC.

Current Principal Place of Business:

1550 W. 60TH ST.
HIALEAH, FL 330126259

New Principal Place of Business:

Current Mailing Address:

1550 W. 60TH ST.
HIALEAH, FL 330126259

New Mailing Address:

FEI Number: 59-2844712 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOPEZ, ANGEL REV. JR
8904 NW 164TH STREET
MIAMI LAKES, FL 33018 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PCD () Delete
Name: LOPEZ, ANGEL JR, REV
Address: 8904 NW 164TH STREET
City-St-Zip: MIAMI LAKES, FL 33018

Title: SD () Delete
Name: PEREZ, ALBERTO
Address: 5102 SW 173 AVE.
City-St-Zip: MIRAMAR, FL 33029

Title: TD () Delete
Name: GRANADA, SILVIO
Address: 4800 NW 173 DR
City-St-Zip: CAROL CITY, FL 33055

Title: MD () Delete
Name: PEREZ, LILLY
Address: 17617 SW 32 ST
City-St-Zip: MIRAMAR, FL 33029

Title: DV () Delete
Name: GOMEZ, MIRIAM
Address: 1550 W 60 ST
City-St-Zip: HIALEAH, FL 33012

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: PEREZ, JULIAN
Address: 8521 NW 172 ST
City-St-Zip: HIALEAH, FL 33015

Title: TD (X) Change () Addition
Name: PERCHITTI, THOMAS
Address: 85 W 60 ST
City-St-Zip: HIALEAH, FL 33012

Title: MD (X) Change () Addition
Name: JORDAN, PEDRO
Address: 159 W 29 ST APT. #1
City-St-Zip: HIALEAH, FL 33012

Title: DV (X) Change () Addition
Name: GOMEZ, MIRIAM
Address: 1869 W 63 ST
City-St-Zip: HIALEAH, FL 33012

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANGEL LOPEZ

PCD

06/03/2008

Electronic Signature of Signing Officer or Director

Date