2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000002300

FILED May 15, 2007 Secretary of State

Entity Name: CONCILIO PENTECOSTAL EBENEZER INC.

entity Nar		
Current P	rincipal Place of Business:	New Principal Place of Business:
494 BROA BROOKLY	DWAY N, NY 11211	
Current M	ailing Address:	New Mailing Address:
494 BROA BROOKLY	DWAY N, NY 11211	
	ce with s. 607.193(2)(b), F.S., the corporation did	
vame and	Address of Current Registered Agent:	Name and Address of New Registered Agent:
	JLIAN 242TH STREET DN, FL 33032 US	
	named entity submits this statement for the e of Florida.	e purpose of changing its registered office or registered agent, or both
n the State	e of Florida.	e purpose of changing its registered office or registered agent, or both
n the State	e of Florida.	
n the State	e of Florida. RE:	
n the State BIGNATUF DFFICERS Title: lame: kddress:	e of Florida. RE: Electronic Signature of Registered A	gent Date
n the State BIGNATUF DFFICERS Title: Islame: Address: City-St-Zip: Islame: Address:	e of Florida. RE: Electronic Signature of Registered A S AND DIRECTORS: P () Delete COTTO, JOSE L 131 MOORE STREET APT 19-A	gent Date ADDITIONS/CHANGES TO OFFICERS AND DIRECTO Title: () Change () Addition Name: Address:
n the State	e of Florida. RE: Electronic Signature of Registered A S AND DIRECTORS: P () Delete COTTO, JOSE L 131 MOORE STREET APT 19-A BROOKLYN, NY 11206 V () Delete BRANO, MARCO A 110 HUMBOLT STREET APT 4-0	gent Date ADDITIONS/CHANGES TO OFFICERS AND DIRECTO Title: () Change () Addition Name: Address: City-St-Zip: Title: V (X) Change () Addition Name: BRAN, MARCO A Address: 110 HUMBOLT STREET APT 4-0

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: JOSE L. COTTO REV. 05/15/2007