

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 12, 2007 08:00 AM
Secretary of State

DOCUMENT # F93000005539 1. Entity Name LA IGLESIA DE DIOS, INC.	
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Principal Place of Business PO BOX 7288 CAGUAS, PUERTO RICO, PR 00725	Mailing Address PO BOX 7288 CAGUAS, PUERTO RICO, PR 00725
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DO NOT WRITE IN THIS SPACE



01102007 No Chg-NP CR2E037 (4/06)

4. FEI Number 65-0481400	Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

ORTIZ, NATANAEL
750 JEFFERSON AVE.
LAKE PLACID, FL 33852

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GARCIA, JACINTO BO. BUENA VISTA HUMACAO, PR 00725
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SANTANA, VICTOR APTD. 1042 GURABO, PR 00725
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S PADILLA, ELIUDIS P.O. BOX 2067 SALINAS, PR 00751
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CAPELES, JULIO O CALLE #2 B-9, URB. LAS CAROLINAS CAGUAS, PR 00725
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CONDE, RICARDO BARRIO HATO SAN LORENZO, PR 00725
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RODRIGUEZ, RUBEN REPARTO SAN JOSE CALLE 1-E-29 GURABO, PR 00725

U00000634229
02/22/07-80001-012 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Rev. E. Padilla Vasquez* **787-617-1433**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #