

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000001402

FILED
Mar 19, 2004
Secretary of State**Entity Name:** IGLESIA CRISTIANA, LA VINA DEL ESPIRITU SANTO, INC.**Current Principal Place of Business:**9370 SUNSET DRIVE
UNIT A -260
MIAMI, FL 33173**New Principal Place of Business:****Current Mailing Address:**14201 S.W. 57TH LANE
UNIT 2
MIAMI, FL 33183**New Mailing Address:****FEI Number:** 65-0995113 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**SALAZAR, DAISY
14201 SW 57TH LN #2
MIAMI, FL 33183 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:** D () Delete
Name: RODRIGUEZ, THELMA
Address: 8761 SW 41ST ST
City-St-Zip: MIAMI, FL 33165**Title:** DP () Delete
Name: SALAZAR, LUIS F
Address: 14201 S.W. 57TH LANE UNIT 2
City-St-Zip: MIAMI, FL 33183**Title:** D () Delete
Name: HOLBROOK, JOSEPH
Address: 25305 SW 136 CT
City-St-Zip: PRINCETON, FL 33032**Title:** T () Delete
Name: MUNOZ, EDUARDO
Address: 10234 SW 9 TERR.
City-St-Zip: MIAMI, FL 33174**Title:** S () Delete
Name: SALAZAR, DAISY H
Address: 14201 SW 57 LN #2
City-St-Zip: MIAMI, FL 33183**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
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Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DAISY H. SALAZAR

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03/19/2004

Electronic Signature of Signing Officer or Director_____
Date