## 2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# N00000001916

TI FILED

Oct 23, 2006

Secretary of State

Entity Name: FARO DE LUZ INTERNACIONAL A MINISTRY OF CENTRO CRISTIANO LATINOAMERICANO

GETSEMANI ASAMBLEAS DE DIOS OF GAINESVILLE, FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business:

404 NW 14 AVE

GAINESVILLE, FL 32601

Current Mailing Address: New Mailing Address:

404 NW 14 AVE

GAINESVILLE, FL 32601

FEI Number: 59-3164570 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LAJARA, IVAN E ROJAS, RAMON J 3631 N W 19TH STREET 404 NW 14TH AVE

GAINESVILLE, FL 32605 US GAINESVILLE, FL 32601 US

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: RAMON J ROJAS 10/23/2006

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ( ) Delete Title: PD (X) Change ( ) Addition

 Name:
 LAJARA, IVAN E
 Name:
 ROJAS, RAMON J

 Address:
 422 NW 14TH AVE
 Address:
 404 NW 14TH AVE

 City-St-Zip:
 GAINESVILLE, FL 32601
 City-St-Zip:
 GAINESVILLE, FL 32601

 Name:
 SIFONTES, JOSE J
 Name:
 MENDEZ, CARMEN

 Address:
 205 SW 75 ST. BLDG. 1 APT. 0
 Address:
 8333 NW 36 AVE

 City-St-Zip:
 GAINESVILLE, FL 32607
 City-St-Zip:
 GAINESVILLE, FL 32606

Title: SD ( ) Delete Title: SD (X) Change ( ) Addition

 Intel
 3D
 ( ) Defete
 Intel
 3D
 (A) Change

 Name:
 SOSTRE, JOSE A
 Name:
 LUVIS, EUNICE

 Address:
 5830 SW 8TH PLACE
 Address:
 515 SW LONG LEAF DR

 City-St-Zip:
 GAINESVILLE, FL 32607
 City-St-Zip:
 LAKE CITY, FL 32024

I hereby certify that the information supplied with this filing does not qualify for the 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: RAMON J ROJAS PD 10/23/2006