

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006671

FILED
Jan 16, 2006
Secretary of State

Entity Name: IGLESIA CRISTIANA SHEKINA MOVIMIENTO EVANGELICO EL TABOR, INC.

Current Principal Place of Business:

2721 MICHIGAN AVE
KISSIMMEE, FL 34744 US

New Principal Place of Business:

Current Mailing Address:

2721 MICHIGAN AVE
KISSIMMEE, FL 34744 US

New Mailing Address:

FEI Number: 59-3693784

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DIAZ, PEDRO A
147 ALDERWOOD DRIVE
KISSIMMEE, FL 34743 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: DIAZ, ROSA
Address: 147 ALDERWOOD DR
City-St-Zip: KISSIMMEE, FL 34743

Title: D () Delete
Name: DIAZ, GAMALIEL
Address: 46 EAST LAKE SHORE BLVD
City-St-Zip: KISSIMMEE, FL 34744

Title: D () Delete
Name: DIAZ, PEDRO A
Address: 147 ALDERWOOD DR
City-St-Zip: KISSIMMEE, FL 34743

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: DIAZ, ROSA
Address: 147 ALDERWOOD DRIVE
City-St-Zip: KISSIMMEE, FL 34743

Title: D (X) Change () Addition
Name: DIAZ, GAMALIEL
Address: 650 WILL BARBER ROAD
City-St-Zip: KISSIMMEE, FL 34744

Title: D (X) Change () Addition
Name: DIAZ, PEDRO A
Address: 147 ALDERWOOD DRIVE
City-St-Zip: KISSIMMEE, FL 34743

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: PEDRO A DIAZ

D

01/16/2006

Electronic Signature of Signing Officer or Director

Date