

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

CB# 100

FILED
Apr 21, 2008 8:00 am
Secretary of State

04-21-2008 90104 014 ****70.00

DOCUMENT # N01000002596		
1. Entity Name SOCIEDAD BIBLICA VALERA, INC.		
Principal Place of Business 724 VERSAILLES LANE KISSIMMEE, FL 34759		Mailing Address 724 VERSAILLES LANE KISSIMMEE, FL 34759
2. Principal Place of Business - No P.O. Box #	3. Mailing Address 2520 S.W. 22ND ST.	
Suite, Apt. #, etc.	SUITE 560	
City & State	City & State MIAMI, FL	
Zip	Country	Zip 33145 Country US



04172008 Chg-NP CR2E037 (12/06)

4. FEI Number
74-3090565

Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent MCARDLE, JOHN J SR 724 VERSAILLES LANE KISSIMMEE, FL 34759		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 2520 S.W. 22ND ST. SUITE 560 City MIAMI FL Zip Code 33145	
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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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D MCARDLE, JOHN J SR 558 HIALEAH DRIVE, BOX 1 HIALEAH, FL 33010 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D MCARDLE, JOHN J, SR 2520 S.W. 22ND ST, SUITE 560, MIAMI, FL 33145 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRUSH, DONALD L 522 HIALEAH DR HIALEAH, FL 33010 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PHILLIP ROBINSON 2520 S.W. 22ND ST, SUITE 560 MIAMI, FL 33145 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GARCIA, PAUL 3195 SW 5TH ST MIAMI, FL 33135 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARCO PEREZ 2520 S.W. 22ND ST, SUITE 560 MIAMI, FL 33145 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/P GARCIA, JORGE 3195 SW 5TH STREET MIAMI, FL 33135 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D EDUARDO ROIG RAMIREZ, SR. 2520 S.W. 22ND ST, SUITE 560 MIAMI, FL 33145 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LISENBEE, BILLY D 522 HIALEAH DRIVE HIALEAH, FL 33010 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER LISENBEE, BILLY D 2520 S.W. 22ND ST, SUITE 560, MIAMI, FL 33145 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MARTELLI JOHNS, GILDA 724 VERSAILLES LANE KISSIMMEE, FL 34759 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	(D) ERNST SIGRIST ☐ Change ☒ Addition 2520 S.W. 22ND ST, SUITE 560 MIAMI, FL 33145

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

[Signature]