

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 29, 2006
Secretary of State**

DOCUMENT# N01000005892

Entity Name: PRIMERA IGLESIA BAUTISTA, INC.

Current Principal Place of Business:

224 NW AVENUE G
BELLE GLADE, FL 33430

New Principal Place of Business:

Current Mailing Address:

224 NW AVENUE G
BELLE GLADE, FL 33430

New Mailing Address:

FEI Number: 65-1078634 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZELAYA, RIGEL
224 NW AVENUE G
BELLE GLADE, FL 33430 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: REV () Delete
Name: ZELAYA, RIGEL
Address: 932 N.E. 21ST SOUTH
City-St-Zip: BELLE GLADE, FL 33430

Title: DTT () Delete
Name: COSSIO, HANS
Address: 932 N.E. 21ST SOUTH
City-St-Zip: BELLE GLADE, FL 33430

Title: TTT () Delete
Name: TORRES, HECTOR A
Address: 300 N.E. AVENUE I
City-St-Zip: BELLE GLADE, FL 33430

Title: TT () Delete
Name: ALONSO, JORGE
Address: 917 N.E. 32ND STREET
City-St-Zip: BELLE GLADE, FL 33430

Title: TT () Delete
Name: ROA, ADALBERTO
Address: 800 S.W. 16TH STREET, #33
City-St-Zip: BELLE GLADE, FL 33430

Title: S () Delete
Name: MEZA, CYNTHIA
Address: 950 OLD US 27 NORTH
City-St-Zip: SOUTH BAY, FL 33493

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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 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: CYNTHIA MEZA

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04/29/2006

Electronic Signature of Signing Officer or Director

Date