

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006182

FILED
Apr 27, 2006
Secretary of State

Entity Name: IGLESIA BAUTISTA BIBLICA EL FARO INC.

Current Principal Place of Business:

2250 STATE ROAD SOUTH
HAINES CITY, FL 33844

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 1645
HAINES CITY, FL 33845

New Mailing Address:

FEI Number: 59-3737854

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FLORES, OSCAR
131 ASHLEY LOOP
DEVENPORT, FL 33837 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,MR () Delete
Name: DONATO, LUCIANO
Address: 1416 WOOD AVE
City-St-Zip: HAINES CITY, FL 33844

Title: D,MR () Delete
Name: MEHESES, MARCO
Address: 813 OGLETHORPE COURT
City-St-Zip: KISSIMMEE, FL 34758

Title: D,MR () Delete
Name: SANTIAGO, ISRAEL
Address: 329 MARQDEE DRIVE
City-St-Zip: KISSIMMEE, FL 34758

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D,MR (X) Change () Addition
Name: MENESES, MARCO
Address: 813 OGLETHORPE COURT
City-St-Zip: KISSIMMEE, FL 34758

Title: D,MR (X) Change () Addition
Name: LOPEZ, ANGEL
Address: 3705 OAK POINTE BLVD
City-St-Zip: KISSIMMEE, FL 34746

Title: D,MR () Change (X) Addition
Name: RODRIGUEZ, RAMON
Address: 136 DIAMOND RIDGE BLVD
City-St-Zip: AUBURNDALE, FL 33823

Title: D,MR () Change (X) Addition
Name: PABLO, ARIAS
Address: 3060 W LAKE HAMILTON RD
City-St-Zip: WINTER HAVEN, FL 33881

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: OSCAR FLORES

MR

04/27/2006

Electronic Signature of Signing Officer or Director

Date