2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N01000008336

Entity Name: MINISTERIO PENTECOSTAL PAN DE VIDA, INC.

Apr 23, 2003 Secretary of State

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

555 S. NORTH LAKE BLVD., STE. 53 531 E. RIDGEWOOD ST.

ALTAMONTE SPRINGS, FL 32701 ALTAMONTE SPRINGS, FL 32701

Current Mailing Address: New Mailing Address:

555 S. NORTH LAKE BLVD., STE. 53 ALTAMONTE SPRINGS, FL 32701 531 E. RIDGEWOOD ST.

ALTAMONTE SPRINGS, FL 32701

FEI Number: 59-3758469 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

TAVARA, YVAR 555 S. NORTH LAKE BLVD., STE. 53

531 E. RÍDGEWOOD ST. ALTAMONTE SPRINGS, FL 32701 ALTAMONTE SPRINGS, FL 32701

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.

TAVARA, YVAR

SIGNATURE: 04/23/2003

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

TAVARA, YVAR TAVARA, YVAR Name: Name:

555 S NORTH LAKE BLVD, SUITE 53 Address: 531 E. RIDGEWOOD ST. Address: City-St-Zip: ALTAMONTE SPRINGS, FL 32701 City-St-Zip: ALTAMONTE SPRINGS, FL 32701

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

HERNANDEZ, RAFAEL Name: Name: DAVILA, DAVILA

Address: 479 SPANISH TRACE Address: 605 FENTON PL. APT. J

City-St-Zip: ALTAMONTE SPRINGS, FL 32714 City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: () Delete Title: (X) Change () Addition TAVARA, MYRIAM M TAVARA, MYRIAM M

Name: Name: 555 S NORTH LAKE BLVD, SUITE 53 531 E. RIDGEWOOD ST. Address: Address:

City-St-Zip: ALTAMONTE SPRINGS, FL 32701 City-St-Zip: ALTAMONTE SPRINGS, FL 32701

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: YVAR TAVARA PD 04/23/2003