2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008524

FILED May 10, 2007 Secretary of State

Entity Name: CONCILIO DE IGLESIA PENTECOSTAL DE AVIVAMIENTO ELOHIM, INC.

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

6200 SHENANDOAH WAY 5040 LAKE UNDERHILL ORLANDO, FL 32807 ORLANDO, FL 32807

Current Mailing Address: New Mailing Address:

6200 SHENANDOAH WAY 5040 LAKE UNDERHILL ORLANDO, FL 32807 ORLANDO, FL 32807

FEI Number: 26-0017038 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

CRESPO, PEDRO

6200 SHENANDOAH WAY

ORLANDO, FL 32807 US

MARTINEZ, ISMAEL
5040 LAKE UNDERHILL
ORLANDO, FL 32807 US

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: ISMAEL MARTINEZ 05/10/2007

Electronic Signature of Registered Agent Date

City-St-Zip:

OFFICERS AND DIRECTORS:

HARTFORD, CT 06106

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

INTERLACHEN, FL 32148

Title: PD () Delete Title: PD (X) Change () Addition Name: CRESPO, PEDRO Name: MARTINEZ, ISMAEL

Address: P O BOX 975 Address: 13216 VILLA VISTA DR APT 103

City-St-Zip: INTERLACHEN, FL 32148 City-St-Zip: ORLANDO, FL 32824

Title: VD () Delete Title: T (X) Change () Addition Name: MORALES, JOSE Name: CRUZ, JUAN

Address: 203 HILLSIDE AVE. Address: P O BOX 693

Title: S () Delete Title: S (X) Change () Addition Name: MORALES, JENNIFER Name: DONATO, SONIA

Address: 254 HILLSIDE AVE. Address: 1132 COBLESTONE CR
City-St-Zip: HARTFORD, CT 06106 City-St-Zip: KISSIMMEE, FL 34744

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

 Name:
 ORTIS, LUIS A
 Name:
 CRUZ, MARIA L

 Address:
 159 OLCOTT ST
 Address:
 13216 VILLA VISTA DR APT 103

 Address:
 159 OLCOTT ST
 Address:
 13216 VILLA VISTA DR APT 103

 City-St-Zip:
 MANCHESTER, CT 06040
 City-St-Zip:
 ORLANDO, FL 32148

Sity-St-Zip. WANGFIESTER, CT 00040 City-St-Zip. CNEANDO, FE 32146

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

 Name:
 CRESPO, MARIA
 Name:

 Address:
 PO BOX 975
 Address:

 City-St-Zip:
 INTERLACHEN, FL 32148
 City-St-Zip:

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

 Name:
 MARAUEZ, MARIBEL
 Name:

 Address:
 203 HILLSIDE AVE
 Address:

 City-St-Zip:
 HARTFORD, CT 06106
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: ISMAEL MARTINEZ PD 05/10/2007