

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000009048

FILED
Mar 30, 2008
Secretary of State

Entity Name: IGLESIA DE DIOS KENDALL, INC.

Current Principal Place of Business:

6814 SW 102ND AVENUE
MIAMI, FL 33173

New Principal Place of Business:

Current Mailing Address:

6814 SW 102ND AVENUE
MIAMI, FL 33173

New Mailing Address:

FEI Number: 30-0015444

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LABRA, CARLOS
6940 SW 89 CT
MIAMI, FL 33173 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: P () Delete
Name: LABRA, CARLOS
Address: 6940 SW 89 CT
City-St-Zip: MIAMI, FL 33173

Title: VP () Delete
Name: CORBO, FRANCISCO
Address: 14308 SW 92 STREET
City-St-Zip: MIAMI, FL 33186

Title: ST () Delete
Name: ZEGARRA, MARIA D
Address: 9781 SW 138 AVE
City-St-Zip: MIAMI, FL 33186

Title: D () Delete
Name: AMADOR, RENE L
Address: 1050 SW 6 STREET # 3
City-St-Zip: MIAMI, FL 33313

Title: D () Delete
Name: HERR, FERNANDO
Address: 5311 SW 89 PLACE
City-St-Zip: MIAMI, FL 33165

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:

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: MARIA D ZEGARRA

ST

03/30/2008

Electronic Signature of Signing Officer or Director

Date