2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01822

FILED Apr 17, 2009 Secretary of State

Entity Name: COMUNIDAD DE ALIANZA LA NUEVA JERUSALEM INC

Entity Nai	me: COMUNI	DAD DE ALIANZA LA NUEVA	JERUSALEM, INC.		
Current Principal Place of Business:			New Principal Place of Business:		
10040 SW MIAMI, FL					
Current M	lailing Addres	ss:	New Mailing Address	New Mailing Address:	
PO BOX 1 MIAMI, FL					
FEI Number	: 65-0045589	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	l Address of (Current Registered Agent:	Name and Address o	f New Registered Agent:	
BROWN, WILLIAM F., JR. 10040 SW 70 ST MIAMI, FL 33173 US			ARGUELLO, NESTOR 7803 SW 129TH PL MIAMI, FL 33183 U	ns S 1	
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATURE: NESTOR ARGUELLO				04/17/2009	
	Electror	nic Signature of Registered Age	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	VD (DELGADILLO, 13052 SW 57T MIAMI, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SD (VARONA, OSC 11105 SW 125 MIAMI, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PD (BROWN, WILL 10040 SW 70 : MIAMI, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TD (ARGUELLO, N 7803 SW 129T MIAMI, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	

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: NESTOR ARGUELLO TD 04/17/2009