

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005440

FILED
Jan 05, 2007
Secretary of State

Entity Name: IGLESIA BAUTISTA ADONAI, INC.

Current Principal Place of Business:

11924 SW 8TH ST.
MIAMI, FL 33184

New Principal Place of Business:

Current Mailing Address:

11924 SW 8TH ST.
MIAMI, FL 33184

New Mailing Address:

FEI Number: 03-0477914

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBAINAS, MOISES
820 SW 105 AVE
APT 610
MIAMI, FL 33174 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: PD () Delete
Name: ROBAINAS, MOISES
Address: 820 SW 105 AVE APT: 610
City-St-Zip: MIAMI, FL 33174

Title: TD () Delete
Name: VAZQUEZ, OCTAVIO
Address: 8005 NW 8ST., APT. B-103
City-St-Zip: MIAMI, FL 33126

Title: VD () Delete
Name: ROBAINAS, GUILLERMINA
Address: 820 SW 105 AVE APT: 610
City-St-Zip: MIAMI, FL 33174

Title: SD () Delete
Name: AQUILAR, LIDIA
Address: 17832 SW 154 CL.
City-St-Zip: MIAMI, FL 33187

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: TD (X) Change () Addition
Name: PEREZ, FELIX
Address: 9250 SW 42ND TERRACE
City-St-Zip: MIAMI, FL 33165

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 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: MOISES ROBAINAS

PD

01/05/2007

Electronic Signature of Signing Officer or Director

Date