

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007117

FILED
Apr 29, 2005
Secretary of State

Entity Name: IGLESIA DE DIOS PUERTA ABIERTA IN RUSKIN, INC.

Current Principal Place of Business:

310 1ST STREET N
UNIT C
RUSKIN, FL 33570

New Principal Place of Business:

310 1ST STREET NE
UNIT C
RUSKIN, FL 33570

Current Mailing Address:

1706 MERIDIAN STREET
RUSKIN, FL 33570

New Mailing Address:

FEI Number: 30-0186195 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

PINA, JOSE
1706 MERIDIAN STREET
RUSKIN, FL 33570 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: PINA, JOSE
Address: 1706 MERIDIAN STREET
City-St-Zip: RUSKIN, FL 33570

Title: STD () Delete
Name: NARVAEZ, ARTURO
Address: 1408 14TH STREET CT W
City-St-Zip: PALMETTO, FL 34221

Title: D () Delete
Name: GARCIA, FIDEL JR.
Address: 108 6TH AVENUE NW
City-St-Zip: RUSKIN, FL 33570

Title: D (X) Delete
Name: BALDERAS, VICTOR
Address: 1328 ATLANTIC DRIVE
City-St-Zip: RUSKIN, FL 33570

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:

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: JOSE PINA

PD

04/29/2005

Electronic Signature of Signing Officer or Director

Date