

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007497

FILED
Apr 15, 2008
Secretary of State

Entity Name: IGLESIA CRISTO MI REDENTOR INC.

Current Principal Place of Business:

1946 SOUTH CONGRESS AVE
WEST PALM BEACH, FL 33406

New Principal Place of Business:

Current Mailing Address:

1946 SOUTH CONGRESS AVE
WEST PALM BEACH, FL 33406

New Mailing Address:

FEI Number: 76-0715422

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RODRIGUEZ, OSCAR
1946 SOUTH CONGRESS AVE
WEST PALM BEACH, FL 33406 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: D () Delete
Name: RODRIGUEZ, OSCAR A
Address: 6772 SILVER RIDGE LN
City-St-Zip: GREENACRES, FL 33413

Title: D () Delete
Name: FRANCISCO, JULIO
Address: 3831CORRIGAN CT
City-St-Zip: LAKE WORTH, FL 33461

Title: D () Delete
Name: TORUNO, GONZALO
Address: 3027 COLLIN DR
City-St-Zip: WEST PALM BEACH, FL 33406

Title: D () Delete
Name: SIM, CARMEN
Address: 3027 COLLIN DR
City-St-Zip: WEST PALM BEACH, FL 33406

Title: D () Delete
Name: ALVARADO, MAURO
Address: 4467 CONSTANTINE CR
City-St-Zip: GREENACRES, FL 33463

Title: D () Delete
Name: RODRIGUEZ, FABIOLA G
Address: 6772 SILVER RIDGE LN
City-St-Zip: GREENACRES, FL 33413

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:

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: OSCAR A. RODRIGUEZ

D

04/15/2008

Electronic Signature of Signing Officer or Director

Date