

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007710

FILED  
Jan 06, 2005  
Secretary of State

**Entity Name:** IGLESIA DE DIOS FARO DE RESTAURACION IN TAMPA, INC.

**Current Principal Place of Business:**

3220 N 40TH ST  
TAMPA, FL 33605

**New Principal Place of Business:**

**Current Mailing Address:**

3220 N 40TH ST  
TAMPA, FL 33605

**New Mailing Address:**

901 YORK DR  
BRANDON, FL 33510

**FEI Number:** 04-3719675

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

RIVERA, JAVIER A  
901 YORK DR  
BRANDON, FL 33510 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: DP ( ) Delete  
Name: RIVERA, JAVIER A  
Address: 901 YORK DR  
City-St-Zip: BRANDON, FL 33510

Title: DS ( ) Delete  
Name: PORRAS, KATIA  
Address: 11921 MESSLER RD  
City-St-Zip: GIBSONTOWN, FL 33534

Title: D ( ) Delete  
Name: BERMUDEZ, ROXANA  
Address: 2011 66TH ST  
City-St-Zip: TAMPA, FL 33619

Title: D ( ) Delete  
Name: MONTES, JOSE  
Address: 686 DRUID PARK DR W  
City-St-Zip: CLEARWATER, FL 33764

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: DS (X) Change ( ) Addition  
Name: RIVERA, CECILIA  
Address: 1967 RADDCLIFFE DR  
City-St-Zip: CLEARWATER, FL 33763

Title: D (X) Change ( ) Addition  
Name: MONTES, ALICIA  
Address: 686 DRUID PARK DR W  
City-St-Zip: CLEARWATER, FL 33764

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: JAVIER A RIVERA

PRES

01/06/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date