

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N02000008005

FILED
Oct 19, 2009
Secretary of State

Entity Name: IGLESIA BIBLICA GRACIA Y VERDAD INC.

Current Principal Place of Business:

2034 SW 173 AVE.
MIRAMAR, FL 33029

New Principal Place of Business:

Current Mailing Address:

2034 SW 173 AVE.
MIRAMAR, FL 33029

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

MARIA, RAFAEL N SR.
2034 SW 173 AVE.
MIRAMAR
FL., FL 33029 US

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: RAFAEL MARIA SR.

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: MARIA, RAFAEL N JR.
Address: 2034 SW 173 AVE.
City-St-Zip: MIRAMAR, FL 33029

Title: VPT () Delete
Name: MARIA, KETTY N
Address: 2034 SW 173 AVE.
City-St-Zip: MIRAMAR, FL 33029

Title: TRT () Delete
Name: PLAZA, MAICKEL
Address: 9768 NW 15 ST.
City-St-Zip: PEMBROKE PINES, FL 33024

Title: SC () Delete
Name: MARIA, SARAI N
Address: 2034 SW 173 AVE.
City-St-Zip: MIRAMAR, FL 33029

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 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: RAFAEL N MARIA

PT

10/19/2009

Electronic Signature of Signing Officer or Director

Date