2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 08, 2009
Secretary of State

DOCUMENT# N02000008030

Entity Name: IGLESIA PENTECOSTAL RESTAURACION Y VIDA INC.

Current Principal Place of Business:

400 W BAKER ST
PLANT CITY, FL 33563

New Principal Place of Business:

Current Mailing Address:

400 W BAKER ST
PLANT CITY, FL 33563

New Mailing Address:

FEI Number: 01-0769669 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **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:

MALDONALDO, JOSE F
2005 WEST BALL STREET
PLANT CITY, FL 33563 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:	MALDONADO, JOSE F	
Address:	2005 WEST BALL STREET	
City-St-Zip:	PLANT CITY, FL 33563	
Title:	VD	( ) Delete
Name:	SANTIAGO, FELISA	
Address:	3102 SAMMONDS RD. #7	
City-St-Zip:	PLANT CITY, FL 33563	
Title:	SD	( ) Delete
Name:	CARRASQUILLO, NYDIA	
Address:	834 SUN RIDGE PT. DR.	
City-St-Zip:	SEFFNER, FL 33584	
Title:	TD	( ) Delete
Name:	MALDONADO, AIDA	
Address:	2005 WEST BALL STREET	
City-St-Zip:	PLANT CITY, FL 33563	
Title:	D	( ) Delete
Name:	SANTIAGO, JOSE	
Address:	3102 SAMMONDS RD. #7	
City-St-Zip:	PLANT CITY, FL 33563	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	SD	(X) Change ( ) Addition
Name:	CARRASQUILLO, NYDIA	
Address:	3747 WILLIAMS LANDING CIRCLE #212	
City-St-Zip:	SEFFNER, FL 33610	
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: JOSE MALDONADO PD 05/08/2009

Electronic Signature of Signing Officer or Director — Date