2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 06, 2004
Secretary of State

DOCUMENT# N02000008091

Entity Name: IGLESIA DE DIOS VIDA NUEVA IN ST PETERSBURG, INC.

Current Principal Place of Business:

921 10TH AVE.
ST. PETERSBURG, FL 33713

New Principal Place of Business:

Current Mailing Address:

921 10TH AVE.
ST. PETERSBURG, FL 33713

New Mailing Address:

FEI Number: 75-3140848 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

RIVERA, LEMUEL
5936 LAKE FRONT DR.
WESLEY CHAPEL, FL 33544 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: RIVERA, LEMUEL
Address: 5936 LAKE FRONT DR.
City-St-Zip: WESLEY CHAPEL, FL 33544

Title: SD ( ) Delete
Name: MARENGO, MINERVA
Address: 4309 TROUT DR. SE
City-St-Zip: ST. PETERSBURG, FL 33705

Title: TD ( ) Delete
Name: SOTO, ALBIN
Address: 10489 113RD ST.
City-St-Zip: LARGO, FL 33778

Title: D ( ) Delete
Name: ZENGOTITA, EDWIN
Address: 2264 60TH WAY N.
City-St-Zip: ST. PETERSBURG, FL 33710

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: ALBIN SOTO TD 05/06/2004

Electronic Signature of Signing Officer or Director — Date