2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2007 8:00 am
Secretary of State
05-01-2007 90009 023 ****61.25

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1. Entity Name
IGLESIA PENTECOSTAL JESUS EL DIOS DE ABRAHAM, INC.

Principal Place of Business	Mailing Address
2920 NW 50 STREET MIAMI, FL 33142	2920 NW 50 STREET MIAMI, FL 33142

04122007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
2920 N.W. 50th st.	2920 N.W. 50th st
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Miami, Fl	City & State: Miami, Fl
Zip: 33142 Country: USA	Zip: 33142 Country: USA

4. FEI Number 20-0012681 ☑ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

PELLON, HUGO A
454 NW 22 AVE
MIAMI, FL 33133

Previous address

7. Name and Address of New Registered Agent

Name: Pellon, Hugo A.
Street Address (P.O. Box Number is Not Acceptable): 2920 N.W. 50th street
City: Miami FL Zip Code: 33142

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: X Rev. Hugo A. Pellon. X DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P PELLON, HUGO A 3544 NW 12 STREET MIAMI, FL 33125	☐ Delete	P Pellon, Hugo A. 2920 N.W. 50th st Miami, FL 33142	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T PELLON, MARIA B 3544 NW 12 STREET MIAMI, FL 33125	☐ Delete	T Pellon, Maria B. 2920 N.W. 50th st. Miami, Fl 33142	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: X Rev. Hugo A. Pellon. 4-25-07 786-443 6316
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #