2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000526

FILED Apr 26, 2009 Secretary of State

Entity Name: IGLESIA BAUTISTA PRINCIPE DE PAZ, INC.

	rincipal Place of Business:	New Principal Place of Business:
958 SW 8: MIAMI, FL		
Current M	lailing Address:	New Mailing Address:
13754 SW MIAMI, FL	147 CIR 3 33186	
FEI Number	: 54-2094076 FEI Number Applied Fo	r() FEI Number Not Applicable() Certificate of Status Desired()
Name and	l Address of Current Registered Ag	gent: Name and Address of New Registered Agent:
PULIDO, I 13754 SW MIAMI, FL	' 147TH CIRCLE #3	
	e named entity submits this statement e of Florida.	for the purpose of changing its registered office or registered agent, or both,
SIGNATU		
	Electronic Signature of Registe	ered Agent Date
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR
Title:	PD () Delete	Title: () Channe () Addition
Name: Address: City-St-Zip:	PULIDO, IVAN 13754 SW 147TH CIRCLE #3 MIAMI, FL 33186	Title: () Change () Addition Name: Address: City-St-Zip:
Name: Address:	13754 SW 147TH CIRCLE #3	Name: Address:
Name: Address: City-St-Zip: Title: Name: Address:	13754 SW 147TH CIRCLE #3 MIAMI, FL 33186 VD () Delete ARMAS, LAZARO 10805 NW 7TH ST. #21	Name: Address: City-St-Zip: Title: () Change () Addition Name: Address:
Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	13754 SW 147TH CIRCLE #3 MIAMI, FL 33186 VD () Delete ARMAS, LAZARO 10805 NW 7TH ST. #21 MIAMI, FL 33172 TD () Delete SABINA, OSVALDO JR 10200 SW 19TH ST.	Name: Address: City-St-Zip: Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address:
Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Address: Address: Address: Address:	13754 SW 147TH CIRCLE #3 MIAMI, FL 33186 VD () Delete ARMAS, LAZARO 10805 NW 7TH ST. #21 MIAMI, FL 33172 TD () Delete SABINA, OSVALDO JR 10200 SW 19TH ST. MIAMI, FL 33165 SD () Delete CASTANO, SARA 14625 SW 47TH TERR	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: OSVALDO SABINA TD 04/26/2009