

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001319

FILED  
Jun 01, 2007  
Secretary of State

**Entity Name:** IGLESIA DE DIOS AGUA DE VIDA IN KISSIMMEE, INC.

**Current Principal Place of Business:**

1140 PARNELL ST  
KISSIMMEE, FL 34741

**New Principal Place of Business:**

**Current Mailing Address:**

1140 PARNELL ST  
KISSIMMEE, FL 34741

**New Mailing Address:**

**FEI Number:** 57-1156063      **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:**

**Name and Address of New Registered Agent:**

CARRO, SARA  
2540 LONG BRANCH CT  
KISSIMMEE, FL 34744 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: CARRO, SARA  
Address: 2540 LONG BRANCH CT  
City-St-Zip: KISSIMMEE, FL 34744

Title: D ( ) Delete  
Name: GARCIA, EDWIN  
Address: 3233 WINDMILL BLVD  
City-St-Zip: KISSIMMEE, FL 34746

Title: D ( ) Delete  
Name: LEBRON, ANGEL  
Address: 11217 DORMER WAY  
City-St-Zip: ORLANDO, FL 32737

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: T (X) Change ( ) Addition  
Name: COLON, HECTOR  
Address: 123 SANDALWOOD CT  
City-St-Zip: KISSIMMEE, FL 34743

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: SARA CARRO

PRES

06/01/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date