2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2007
Secretary of State

DOCUMENT# N03000002053

Entity Name: IGLESIA DE DIOS RENACER IN BROWARD, INC

Current Principal Place of Business:

9868 PINES BLVD
PEMBROKE PINES, FL 33024

New Principal Place of Business:

Current Mailing Address:

15344 SW 19TH ST
MIRAMAR, FL 33027

New Mailing Address:

FEI Number: 54-2099549 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FUENTES, DAVID
15344 SW 19TH ST
MIRAMAR, FL 33027 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: DP ( ) Delete
Name: FUENTES, DAVID
Address: 15344 SW 19TH ST
City-St-Zip: MIRAMAR, FL 33027

Title: MP ( ) Delete
Name: FUENTES, MARISOL
Address: 15344 SW 19TH ST
City-St-Zip: MIRAMAR, FL 33027

Title: DS ( ) Delete
Name: CABRERA, NANCY
Address: 17096 COLLINS AVE APT D210
City-St-Zip: SUNNY ISLES, FL 33160

Title: DT ( ) Delete
Name: CABRERA, JOSE
Address: 17096 COLLINS AVE APT D210
City-St-Zip: SUNNY ISLES, FL 33160

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 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: DAVID FUENTES DP 01/12/2007

Electronic Signature of Signing Officer or Director — Date