2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003859

FILED Jul 12, 2007 Secretary of State

| DOCON | IEN 1# 1000000000009 | | Secretary of State | |
|--------------------------------------|---|---|--|--|
| Entity Nar | ne: IGLESIA AVIVAMIENTO DE CRIS | TO INC. | | |
| Current Principal Place of Business: | | New Principal Place of I | New Principal Place of Business: | |
| 1764 W. Fl MIAMI, FL | LAGLER STREET 33135 | | | |
| Current M | ailing Address: | New Mailing Address: | | |
| 1764 W. Fl MIAMI, FL | LAGLER STREET 33135 | | | |
| In accordan | 13-4250737 FEI Number Applied For (ce with s. 607.193(2)(b), F.S., the corporation Address of Current Registered Age | did not receive the prior notice. | Certificate of Status Desired () | |
| Naille allu | Address of Current Registered Age | iit. Name and Address of N | ew Registered Agent. | |
| | RIA, MARLENE | | | |
| 1331 NW 3 MIAMI, FL | | | | |
| , | | | | |
| | named entity submits this statement for e of Florida. | r the purpose of changing its registered of | fice or registered agent, or both, | |
| SIGNATUF | RE: | | | |
| | Electronic Signature of Registere | ed Agent | Date | |
| OFFICERS AND DIRECTORS: | | ADDITIONS/CHANGES | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: | D () Delete | Title: () | Change () Addition | |
| Name: Address: | CHAVARRIA, MARLENE 1331 NW 34 ST | Name: Address: | | |
| City-St-Zip: | MIAMI, FL 33142 | City-St-Zip: | | |
| Title: | D () Delete | Title: () | Change () Addition | |
| Name: | MARTINEZ, JULIO | Name: | | |
| Address: City-St-Zip: | 16801 NE 14 AVE #211 N MIAMI BEACH, FL 33162 | Address: City-St-Zip: | | |
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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: M CHAVARRIA PRES 07/12/2007