2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N03000004654

TI FILED
Oct 15, 2007
Secretary of State

Entity Name: IGLESIA BAUTISTA BETANIA OF FT. LAUDERDALE INC.

Current Principal Place of Business: New Principal Place of Business:

2200 N.W. 12 AVE.

FT. LAUDERDALE, FL 33311

Current Mailing Address: New Mailing Address:

6161 N.W. 57TH CT. BLDG. 20, APT. #311 TAMARAC, FL 33319

FEI Number: 55-0835813 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CRUZ, SAMUEL E PASTOR 6161 N.W. 57TH CT. BLDG. 20, APT. #311 TAMARAC, FL 33319 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:

- Flateric Circular (Davidson | Annal

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MRS. () Delete Title: SEC. (X) Change () Addition Name: BRIONES, DORIS E SECRETA Name: BRIONES, DORIS E SEC.
Address: 8161 N. UNIVERSITY DR. APT. 12 Address: 9971 W. ATLANTIC BLVD.
City-St-Zip: TAMARAC, FL 33321 City-St-Zip: CORAL SPRINGS, FL 33071

Title: MR. () Delete Title: VP (X) Change () Addition Name: ROMERO, CARLOS A TREAS. Name: ROMERO, CARLOS A VP

 Address:
 1436 AVON LANE 512
 Address:
 1436 AVON LANE 512

 City-St-Zip:
 N. LAUDERDALE, FL 33068
 City-St-Zip:
 N. LAUDERDALE, FL 33068

Title: () Delete Title: P () Change (X) Addition

 Name:
 Name:
 CRUZ, SAMUEL E PRES

 Address:
 Address:
 6161 NW 57TH COURT, BLDG. 20 APT. 311

City-St-Zip: City-St-Zip: TAMARAC, FL 33319

Title: () Delete Title: TREA () Change (X) Addition
Name: BARRERA, PAULA N TREAS
Address: 9969 W. ATLANTIC BLVD.

Address: Address: 9969 W. ATLANTIC BLVD.
City-St-Zip: City-St-Zip: CORAL SPRINGS, FL 33071

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: SAMUEL E. CRUZ P 10/15/2007