2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 01, 2007 08:00 AM
Secretary of State

DOCUMENT # N03000007555

1. Entity Name
IGLESIA LA VIDA ETERNA INC.

Principal Place of Business	Mailing Address
1793 WEST 37 STREET 2ND FLOOR HIALEAH, FL 33012	6259 SW 62 CT MIAMI, FL 33143

01152007 No Chg-NP CR2E037 (4/06)

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4. FEI Number
56-2391547
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MENDEZ, LIZBETH M
6259 SW 62 CT
MIAMI, FL 33143

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Lizbeth M Mendez Lizbeth M. Mendez 1/29/07
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-instating) DATE

Filing Fee is $61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	MENDEZ, RAFAEL A
STREET ADDRESS	6259 SW 62 CT
CITY-ST-ZIP	MIAMI, FL 33143
TITLE	D
NAME	MENDEZ, LIZBETH M
STREET ADDRESS	6259 SW 62 CT
CITY-ST-ZIP	MIAMI, FL 33143
TITLE	SEC
NAME	GONZALEZ, LOURDES
STREET ADDRESS	6259 SW 62 CT.
CITY-ST-ZIP	MIAMI, FL 33143
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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02/06/07-80076-011 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Lizbeth M Mendez Lizbeth M. Mendez 305-300-5309
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date 1/29/07 Daytime Phone #