


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2004 8:00 am
Secretary of State

03-19-2004 90051 046 ****70.00

DOCUMENT # N03000009765

1. Entity Name
IGLESIA EVANGELICA PENTECOSTAL ESCAPA POR TU VIDA GN:19:17, INC.



Principal Place of Business
 2643 ROYAL DRIVE
 LAKELAND, FL 33801 US

Mailing Address
 2643 ROYAL DRIVE
 LAKELAND, FL 33801 US

94032505



2. Principal Place of Business
 New Address: 201-22 St NW
 Suite, Apt. #, etc.
 Winter Haven
 City & State
 Florida
 Zip
 33881

3. Mailing Address
 Suite, Apt. #, etc.
 City & State
 Zip
 Country

03012004 Chg-NP CR2E037 (10/03)

4. FEI Number
 20-0374801 Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 MARTINEZ, MIGUEL JR.
 2643 ROYAL DRIVE
 LAKELAND, FL 33801

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City
 FL Zip Code

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 *Miguel Martinez Jr.*
 Signature typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25 Due by May 1, 2004

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

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	MARTINEZ, MIGUEL JR	
STREET ADDRESS	2643 ROYAL DRIVE	201-22st NW
CITY-ST-ZIP	LAKELAND, FL 33801	Winter Haven FL 33881
TITLE	T	<input type="checkbox"/> Delete
NAME	GONZALEZ, MARTHA I	
STREET ADDRESS	524 AVENUE B NE	
CITY-ST-ZIP	WINTER HAVEN, FL 33881	
TITLE	S	<input type="checkbox"/> Delete
NAME	SANTIAGO, ELIZABETH	
STREET ADDRESS	2643 ROYAL DRIVE	
CITY-ST-ZIP	LAKELAND, FL 33801	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MARTINEZ MIGUEL JR.	
STREET ADDRESS	201-22 St NW	
CITY-ST-ZIP	Winter Haven FL 33881	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *Miguel Martinez Jr.* Miguel MARTINEZ JR. 3/13/04 (863) 294-9798
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Profile #