

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03872

FILED
Mar 05, 2007
Secretary of State

Entity Name: IGLESIA EVANGELICA DEL BUEN PASTOR, INC.

Current Principal Place of Business:

9860 SW 56 ST
MIAMI, FL 33173 US

New Principal Place of Business:

Current Mailing Address:

10111 SW 66 ST
MIAMI, FL 33173

New Mailing Address:

FEI Number: 65-0018003

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

NODARSE, GLADYS PD
10111 S.W. 66TH STREET
MIAMI, FL 33173 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: PD () Delete
Name: NODARSE, GLADYS
Address: 10111 S.W. 66TH STREET
City-St-Zip: MIAMI, FL

Title: TD () Delete
Name: LLOVIO, MIRTA
Address: 628 W. 17TH ST
City-St-Zip: HIALEAH, FL 33010

Title: SD () Delete
Name: NODARSE, JOSE
Address: 10111 SW 66 ST
City-St-Zip: MIAMI, FL 33173

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: NODARSE, JOSE
Address: 10111 S.W. 66TH STREET
City-St-Zip: MIAMI, FL

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: FEBLES, GLADYS
Address: 628 W. 17TH ST
City-St-Zip: HIALEAH, FL 33010

Title: VP () Change (X) Addition
Name: NODARSE, GLADYS
Address: 10111 SW 66 ST
City-St-Zip: MIAMI, FL 33173

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: JOSE NODARSE

PD

03/05/2007

Electronic Signature of Signing Officer or Director

Date