

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2007 08:00 AM
Secretary of State

DOCUMENT # N04000000238

1. Entity Name
IGLESIA EL SHADDAI, INC.



Principal Place of Business
**4401 E. COLONIAL DR
ORLANDO, FL 32803**

Mailing Address
**2616 PEEL AVE.
ORLANDO, FL 32806**



04132007 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-3563523

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**OLIVENCIA, DAVID
2616 PEEL AVE.
ORLANDO, FL 32806**

**DO NOT WRITE
IN THIS SPACE**

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 _____
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, 2007**

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

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	CRUZ, RAFAEL REV.
STREET ADDRESS	2616 PEEL AVE.
CITY-ST-ZIP	ORLANDO, FL 32806
TITLE	O
NAME	DE LEON, CHRISTIAN
STREET ADDRESS	213 PARK TREE TER #821
CITY-ST-ZIP	ORLANDO, FL 32825
TITLE	ST
NAME	RAMOS, ILIANA E
STREET ADDRESS	2616 PEEL AVE.
CITY-ST-ZIP	ORLANDO, FL 32806
TITLE	O
NAME	VILLANUEVA, RAMON
STREET ADDRESS	1104 CHIEF TRAIL
CITY-ST-ZIP	ORLANDO, FL 32825
TITLE	SD
NAME	LEDUC, NORMA
STREET ADDRESS	1563 CRICKET CLUB APT 306
CITY-ST-ZIP	ORLANDO, FL 32828
TITLE	O
NAME	RIVERA, ELIZABETH
STREET ADDRESS	5009 GARDENS DRIVE
CITY-ST-ZIP	ORLANDO, FL 32812

1000000712412
04/26/07-80045-014 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: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/13/07 321 331 0725
Date Daytime Phone #