2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000000429

FILED Feb 10, 2005 Secretary of State

Entity Name: IGLESIA CASA DEL SENOR Y PUERTA DEL CIELO, INC.

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

8650 SW 133 AVE RD MP 316 MIAMI, FL 33186

Current Mailing Address: New Mailing Address:

P O BOX 832710 MIAMI, FL 332832770

FEI Number: 32-0104424 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:

 JIRON, ORLANDO
 JIRON, ORLANDO

 8650 SW 133 AVE RD MP 316
 12695 SW 77 STREET

 MIAMI, FL 33186 US
 MIAMI, FL 33183 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: ORLANDO JIRON 02/10/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PD () Delete Title: PD (X) Change () Addition

 Name:
 JIRON, ORLANDO
 Name:
 JIRON, ORLANDO

 Address:
 8650 SW 133 AVE RD MP 316
 Address:
 12695 SW 77 STREET

City-St-Zip: MIAMI, FL 33186 City-St-Zip: MIAMI, FL 33183

Title: VSD () Delete Title: VSD (X) Change () Addition Name: JIRON, ARLENE Name: JIRON, ARLENE

 Name:
 JIRON, ARLENE
 Name:
 JIRON, ARLENE

 Address:
 8650 SW 133 AVE RD MP 316
 Address:
 12695 SW 77 STREET

 City-St-Zip:
 MIAMI, FL 33186
 City-St-Zip:
 MIAMI, FL 33183

Title: TD () Delete Title: () Change () Addition

 Name:
 VASQUEZ, GLENDY
 Name:

 Address:
 13834 SW 68 ST
 Address:

 City-St-Zip:
 MIAMI, FL 33183
 City-St-Zip:

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

 Name:
 Name:
 ROXSANA, GUZMAN

 Address:
 Address:
 PO BOX 35-1055

 City-St-Zip:
 City-St-Zip:
 MIAMI, FL 33135

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JIRON ORLANDO PD 02/10/2005