2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0400000548

City-St-Zip:

KISSIMMEE, FL 34744

TABERNACULO NUEVO COMIENZO, INC

FILED Apr 24, 2009 Secretary of State

Entity Nai	me: TABERINA	ACULO NUEVO COMIENZO,	INC.			
Current P	rincipal Place	of Business:	New Prince	New Principal Place of Business:		
2001 W VINE ST. KISSIMMEE, FL 34744				2001 W VINE ST. KISSIMMEE, FL 34741		
Current M	lailing Addres	s:	New Maili	New Mailing Address:		
2001 W VINE ST. KISSIMMEE, FL 34744				2001 W VINE ST. KISSIMMEE, FL 34741		
FEI Number: 20-0708209 FEI Number Applied For ()		FEI Number Not Applicable () Certificate		Certificate of Status Desired ()		
Name and	Address of C	urrent Registered Agent:	Name and	Address of I	New Registered Agent:	
910 VAQU	HECTOR M IERO LN IE, FL 34741	US				
	named entity see of Florida.	submits this statement for the p	ourpose of changing i	ts registered o	office or registered agent, or both,	
SIGNATU	RE:					
	Electron	ic Signature of Registered Ag	ent		Date	
OFFICER	S AND DIREC	rors:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PD () MUNDO, HECTO 910 VAQUERO KISSIMMEE, FL	LN	Title: Name: Address: City-St-Zip:	() Change ()Addition	
Title: Name: Address: City-St-Zip:	VD () SANTANA, IRIS 910 VAQUERO KISSIMMEE, FL		Title: Name: Address: City-St-Zip:	() Change ()Addition	
Title: Name: Address: City-St-Zip:	SERRANO, KES	RIDGE CIRCLE APT.C	Title: Name: Address: City-St-Zip:	SD (X MARIA, VAZQU 2057ESTANCI, KISSIMMEE, F	A CIRCLE	
Title: Name: Address: City-St-Zip:	TD () SANTANA, MAG 2030 ESTANCIA KISSIMMEE, FL	CIRCLE	Title: Name: Address: City-St-Zip:	TD (X LINETTE, TOR 3122 MESAVE KISSIMMEE, F	RDE DR.	
Title: Name: Address:	MUNDO, MARC	Delete OS RIDGE CIRCLE	Title: Name:	V (X ANGEL, LOPE 2712 PORTCH		

I hereby certify that the information supplied with this filing does not qualify 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.

City-St-Zip: KISSIMMEE, FL 34744

SIGNATURE: IRIS SANTANA VP 04/24/2009