## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000002229

Entity Name: IGLESIA TORRE FUERTE, CORP.

FILED Jul 01, 2005 Secretary of State

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

11101 SW 88 AVE #A-202 14022 SW 178 STREET MIAMI, FL 33176 MIAMI, FL 33177

Current Mailing Address: New Mailing Address:

11101 SW 88 AVE #A-202 14022 SW 178 STREET MIAMI, FL 33176 MIAMI, FL 33177

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PARRA, LUIS F
11101 SW 88 AVE #A-202 PARRA, LUIS F
14022 SW 178 STREET
MIAMI, FL 33176 US MIAMI, FL 33177 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: LUIS F. PARRA 07/01/2005

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 PARRA, LUIS F
 Name:
 PARRA, LUIS F

 Address:
 11101 SW 88 AVE #A-202
 Address:
 14022 SW 178 STREET

 City-St-Zip:
 MIAMI, FL 33176
 City-St-Zip:
 MIAMI, FL 33177

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

Name: PAZ, MARTHA Name: PAZ, MARTHA

Address: 11101 SW 88 AVE #A-202 Address: 14022 SW 178 STREET
City-St-Zip: MIAMI, FL 33176 City-St-Zip: MIAMI, FL 33177

Title: TD () Delete Title: TD (X) Change () Addition
Name: GONZALEZ, CELESTE M Name: GONZALEZ, CELESTE M

 Name:
 GONZALEZ, CELESTE M
 Name:
 GONZALEZ, CELESTE M

 Address:
 11101 SW 88 AVE #A-202
 Address:
 14022 SW 178 STREET

 City-St-Zip:
 MIAMI, FL 33176
 City-St-Zip:
 MIAMI, FL 33177

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: LUIS F. PARRA PD 07/01/2005