

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006751

FILED
Apr 27, 2006
Secretary of State

Entity Name: IGLESIA DE CRISTO MI-EL, INC.

Current Principal Place of Business:

100 MIRACLE MILE 3 FLOOR
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

2494 S.W. 16TH STREET
MIAMI, FL 33145

New Mailing Address:

1560 SARAGOSSA AVENUE
CORAL GABLES, FL 33134

FEI Number: 84-1652708

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PINEDA, EDGAR
1560 SARAGOSSA AVE
CORAL GABLES, FL 33134 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: DP () Delete
Name: PINEDA, EDGAR
Address: 1560 SARAGOSSA AVE
City-St-Zip: CORAL GABLES, FL 33134

Title: DS () Delete
Name: PINEDA, VERONICA
Address: 1560 SARAGOSSA AVE
City-St-Zip: CORAL GABLES, FL 33134

Title: D () Delete
Name: PINEDA, BARBARA
Address: 1560 SARAGOSSA AVE
City-St-Zip: CORAL GABLES, FL 33134

Title: D (X) Delete
Name: DE LA PENA, LUIS
Address: 12100 SW 4 TERR
City-St-Zip: MIAMI, FL 33184

Title: D (X) Delete
Name: ZAMORA, RAMON
Address: 7211 W SW 4 TERR
City-St-Zip: MIAMI, FL 33184

Title: D (X) Delete
Name: ZAMORA, DANNY
Address: 7211 W SW 4 TERR
City-St-Zip: MIAMI, FL 33184

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

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: EDGAR PINEDA

P

04/27/2006

Electronic Signature of Signing Officer or Director

Date