

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007461

FILED  
Jan 18, 2007  
Secretary of State

Entity Name: IGLESIA ECUMENICA SAN FRANCISCO DE ASIS INC.

**Current Principal Place of Business:**

1244 E 4TH AVE  
HIALEAH, FL 33010

**New Principal Place of Business:**

**Current Mailing Address:**

1244 E 4TH AVE  
HIALEAH, FL 33010

**New Mailing Address:**

FEI Number: 20-1439440

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ESCOBAR, MARITZA  
190-174TH ST  
SUITE 1606  
NORTH MIAMI BEACH, FL 33160 US

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

ESCOBAR, MARITZA  
290-174TH ST  
SUITE 1606  
NORTH MIAMI BEACH, FL 33160 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: MARITZA ESCOBAR

01/18/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: ESCOBAR, MARITZA  
Address: 290-174 ST SUITE 1606  
City-St-Zip: NORTH MIAMI BEACH, FL 33160

Title: S ( ) Delete  
Name: ZORRILLA, VENACIO  
Address: 10090 NW 80 COURT  
City-St-Zip: HIALEAH, FL 33016

Title: D ( ) Delete  
Name: MENENDEZ, GERARDO  
Address: 11015 NW 17 AVE.  
City-St-Zip: MIAMI, FL 33167

**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:

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: MARITZA ESCOBAR

D

01/18/2007

Electronic Signature of Signing Officer or Director

Date