

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009802

FILED
May 02, 2011
Secretary of State

Entity Name: IGLESIA CASA DE RESTAURACION SHALOM, INC.

Current Principal Place of Business:

239 S. MAIN STREET
WILLISTON, FL 32696

New Principal Place of Business:

Current Mailing Address:

PO BOX 248
WILLISTON, FL 32696

New Mailing Address:

FEI Number: 51-0528146

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSADO, OMAR
5225 NE 134 AVE
WILLISTON, FL 32696 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: PAST
Name: ROSADO, OMAR
Address: 5225 NE 134 AVE
City-St-Zip: WILLISTON, FL 32696

Title: SEC
Name: SOTO, DAMARIS
Address: P.O. BOX 776
City-St-Zip: BRONSON, FL 32621

Title: TRE
Name: RIVERA, ORLANDO
Address: 8471 NE 111ST.
City-St-Zip: BRONSON, FL 32621

Title: VP
Name: CARRASQUILLO, JUDITH M
Address: 5225 NE 134 AVE
City-St-Zip: WILLISTON, FL 32696

Title: EVAN
Name: SOLER, JOSE R
Address: NW 146 DR 203
City-St-Zip: NEWBERRY, FL 32669

Title: VOCA
Name: ROSADO, ISMAEL
Address: 911 NE HWY 121
City-St-Zip: WILLISTON, FL 32696

I hereby 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 all other like empowered.

SIGNATURE: OMAR ROSADO

PAST

05/02/2011

Electronic Signature of Signing Officer or Director

Date