2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000001512

FILED Mar 10, 2009 Secretary of State

Entity Name: MOVIMIENTO IGLESIAS MISIONERAS PENIEL, INC. **New Principal Place of Business: Current Principal Place of Business:** 2718 N. FLORIDA AVENUE TAMPA, FL 33603 **Current Mailing Address: New Mailing Address:** P.O. BOX 4715 TAMPA, FL 336774715 US FEI Number: 20-2417524 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LAGARES, ANGEL SR. 3604 W BÁY AVENUE TAMPA, FL 33611 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete TORRES, ERMES SR. Name: Name: Address: 603 W VIRGINIA AVENUE Address: City-St-Zip: TAMPA, FL 33603 US City-St-Zip: Title: () Delete Title: () Change () Addition LOPEZ, BETZAIDA MRS. Name: Name: Address: 830 CONTINENTAL DRIVE Address: City-St-Zip: BROOKSVILLE, FL 34601 US City-St-Zip: Title: () Delete Title: () Change () Addition ESQUILIN, MANUEL SR. Name: Name: 2010-B 24TH AVENUE Address: Address: City-St-Zip: TAMPA, FL 33605 US City-St-Zip:

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.

SIGNATURE: ANGEL LAGARES D 03/10/2009