


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 08:00 AM
Secretary of State

DOCUMENT # N05000005751	
1. Entity Name ETERNAL LIFE, INC.	

Principal Place of Business 4540 SW 74 AVE. MIAMI, FL 33155	Mailing Address 4540 SW 74 AVE. MIAMI, FL 33155
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DO NOT WRITE IN THIS SPACE



04252007 No Chg-NP CR2E037 (4/06)

4. FEI Number 20-3134885	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**ZUNIGA, RODRIGO E.
4540 SW 74 AVE.
MIAMI, FL 33155**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP ZUNIGA, RODRIGO E. 4540 SW 74 AVE. MIAMI, FL 33155
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP FLORES, ROBINSON ELIAS 4540 SW 74 AVE. MIAMI, FL 33155
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT SANDOVEL, ISABEL 4540 SW 74 AVE. MIAMI, FL 33155
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS ZUNIGA, YALEMIL 4540 SW 74 AVE. MIAMI, FL 33155
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DR MONSALVES, JUAN 5563 BURR STREET LEHIGH ACRES, FL 33971
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

U000000747991
05/17/07-80048-006.70.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **26, 2007**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #