## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000002817

Entity Name: IGLESIA BALITISTA MLEBENEZER INC.

FILED Jan 07, 2008 Secretary of State

Littly Na	IIIE. IGLESIA BAOTISTA WII EBENEZER	NC .
Current P	rincipal Place of Business:	New Principal Place of Business:
	ST HOMESTEAD EAD, FL 33030 US	344 W. MOWRY STREET HOMESTEAD, FL 33030 US
Current M	lailing Address:	New Mailing Address:
820 SW 10	05 AVE	
610 MIAMI, FL	33174 US	
FEI Number	: FEI Number Applied For ( )	FEI Number Not Applicable (X) Certificate of Status Desired ( )
Name and	Address of Current Registered Agent:	Name and Address of New Registered Agent:
820 SW 10 610	S, MOISES SR 05 AVE 33174 US	
	named entity submits this statement for the of Florida.	e purpose of changing its registered office or registered agent, or bot
SIGNATUI	RE:	
	Electronic Signature of Registered	gent Date
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECT
Title: Name: Address: City-St-Zip: Title:	P () Delete ROBAINAS, MOISES 820 SW 105 AVE APT 610 MIAMI, FL 33174 VP () Delete	Title: PD (X) Change ( ) Addition Name: ROBAINAS, MOISES Address: 820 SW 105 AVE APT 610 City-St-Zip: MIAMI, FL 33174  Title: VP (X) Change ( ) Addition
Name: Address: City-St-Zip:	LOPEZ, VICTOR 815 N HOMESTEAD BLVD # 350 HOMESTEAD, FL 33030	Name: COBOS, IVETE Address: 220 N.E. 12 AVE. #117 City-St-Zip: HOMESTEAD, FL 33030
Title: Name: Address: City-St-Zip:	SD ( ) Delete AMADOR, MARIA C 920 SW 7 PL FLORIDA CITY, FL 33034	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	TD () Delete MESA, MERCEDES 13785 SW 66 ST UNIT C -132 MIAMI, FL 33183	Title: T (X) Change () Addition Name: JUAN, MURILLO Address: 1575 S.W. 5 ST. #201 City-St-Zip: HOMESTEAD, FL 33030
Title: Name: Address: City-St-Zip:	( ) Delete	Title: VPD ( ) Change (X) Addition Name: ROBAINAS, GUILLERMINA S Address: 820 S.W. 105 AVE. #610 City-St-Zip: MIAMI, FL 33174

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: MOISES ROBAINAS DP 01/07/2008