2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003519

FILED Apr 02, 2012 Secretary of State

Entity Name: IGLESIA SANIDAD Y RESTAURACION, INC.

Current Principal Place of Business: New Principal Place of Business:

458 LAKE BRIDGE LN 941 LONGDALE AVE

APOPKA, FL 32703 US LONGWOOD, FL 30750 US

Current Mailing Address: New Mailing Address:

458 LAKE BRIDGE LN 502 JESSUP AVE.

APOPKA, FL 32703 US LONGWOOD, FL 32750 US

FEI Number: 20-4188781 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:

VALENTIN, OBET
458 LAKE BRIDGE LN

VALENTIN, OBET
502 JESSUP AVE.

APOPKA, FL 32703 US LONGWOOD, FL 32750 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: OBET VALENTIN 04/02/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: F

Name: VALENTIN, OBET Address: 502 JESSUP AVE.

City-St-Zip: LONGWOOD, FL 32750 US

Title: VP

Name: VALENTIN, MARY ANN
Address: 502 JESSUP AVE.

City-St-Zip: LONGWOOD, FL 32750 US

Title: T

 Name:
 TORRES, ALEXANDER

 Address:
 1098 TIMBERLANE TR.

 City-St-Zip:
 CASSELBERRY, FL 32707 US

Title:

Name: PEREZ-ERAZO, OMAYRA Address: 671 CALIENTE WAY.

City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: V

 Name:
 RODRIGUEZ, MARIA E

 Address:
 1015 BRENTWOOD ST.

 City-St-Zip:
 APOPKA, FL 32703

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: OBET VALENTIN P 04/02/2012