2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003834

FILED Feb 22, 2008 Secretary of State

Entity Name: ASSEMBLY OF GOD MISSION ETERNAL ROCK, CORP

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

2733 SE MORNINGSIDE BLVD 551 SW BETHANY DRIVE PORT SAINT LUCIE, FL 34952 PORT SAINT LUCIE, FL 34986

Current Mailing Address: New Mailing Address:

PO BOX 881777 2131 SW COLWELL AVE PORT ST LUCIE, FL 34988 PORT ST LUCIE, FL 34953

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PEREIRA, ALEXANDRE LIRA JR, GENTIL

2020 SW GRANT AVE 2131 SW COLWELL AVE

PORT SAINT LUCIE, FL 34953 US PORT SAINT LUCIE, FL 34953 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: GENTIL LIRA JR 02/22/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: PD (X) Change () Addition Name: PEREIRA, ALEXANDRE Name: LIRA JR, GENTIL

 Address:
 2020 SW GRANT AVE
 Address:
 2131 SW COLWELL AVE

 City-St-Zip:
 PORT ST LUCIE, FL 34953
 City-St-Zip:
 PORT ST LUCIE, FL 34953

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 SACRAMENTO, PAULO L
 Name:
 LIRA, JACQUELINE

 Address:
 6282 NW 36TH AVE
 Address:
 2131 SW COLWELL AVE

 City-St-Zip:
 COCONUT CREEK, FL 33073
 City-St-Zip:
 PORT SAINT LUCIE, FL 34953

Title: () Delete Title: (X) Change () Addition SACRAMENTO, OSLAIR DEOLIVEIRA, J EDGARD Name: Name: Address: 6282 NW 36TH AVE Address: 542 NW KILPATRICK AVE COCONUT CREEK, FL 33073 City-St-Zip: City-St-Zip: PORT SAINT LUCIE, FL 34983

Title: S () Delete Title: 2TD (X) Change () Addition

 Name:
 SACRAMENTO, CRISTIANE
 Name:
 GUIDO, RENATO

 Address:
 2020 SW GRANT AVE
 Address:
 2131 SW COLWELL AVE

 City-St-Zip:
 PORT ST LUCIE, FL 34953
 City-St-Zip:
 PORT ST LUCIE, FL 34953

Title: () Delete Title: S () Change (X) Addition

 Name:
 Name:
 GUIDO, RAQUEL

 Address:
 Address:
 2131 SW COLWELL AVE

 City-St-Zip:
 City-St-Zip:
 PORT SAINT LUCIE, FL 34953

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: GENTIL LIRA JR PD 02/22/2008

Electronic Signature of Signing Officer or Director

Date