2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000005084

Entity Name: IGLESIA ALFAY OMEGA A.D. INC

FILED Jan 23, 2008 Secretary of State

Littly Nai	INC.	
Current P	rincipal Place of Business:	New Principal Place of Business:
1022 OAK ARCADIA,		
Current M	Address: ST., FL 34266 FEI Number Applied For () Address of Current Registered Agent: O, JIMIRO REV. TANZAS DR. ERS, FL 33905 US e named entity submits this statement for the period of Florida. RE: Electronic Signature of Registered Agent: S AND DIRECTORS: P () Delete JUVIER, AMAURY 134 S PASCO AVE. ARCADIA, FL 34266 S () Delete WILEY, MYDALYS 303 MCKINLEY AVE ARCADIA, FL 34266 T () Delete PINEDA, ERNESTINA P O BOX 1309 NOCAHEE, FL 34268 D () Delete GARCIA, ESTHER 5669 SW CHAROLAIS AVE	New Mailing Address:
1022 OAK ARCADIA,		134 SOUTH PASCO AVENUE ARCADIA, FL 34266
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:
13843 MATEORT MYE	TÄNZAS DR. ERS, FL 33905 US named entity submits this statement for the	e purpose of changing its registered office or registered agent, or both,
SIGNATUR		
01014/(101		gent Date
OFFICERS	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
Title: Name: Address: City-St-Zip:	JUVIER, AMAURY 134 S PASCO AVE.	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	WILEY, MYDALYS 303 MCKINLEY AVE	Title: S (X) Change () Addition Name: WILEY, MYDALIS Address: 303 MCKINLEY AVE City-St-Zip: ARCADIA, FL 34266
Title: Name: Address: City-St-Zip:	PINEDA, ERNESTINA P O BOX 1309	Title: T (X) Change () Addition Name: PINEDA, ERNESTINA Address: P O BOX 1309 City-St-Zip: NOCATEE, FL 34268
Title: Name: Address: City-St-Zip:	GARCIA, ESTHER	Title: () Change () Addition Name: Address: 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: MYDALIS WILEY SECR 01/23/2008