

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000005128

FILED
Mar 28, 2007
Secretary of State

Entity Name: IGREJA BATISTA VIDA INC

Current Principal Place of Business:

1811 SE 19TH LANE
CAPE CORAL, FL 33990

New Principal Place of Business:

3800 FOWLER STREET
UNIT 6
FORT MYERS, FL 33901

Current Mailing Address:

1811 SE 19TH LANE
CAPE CORAL, FL 33990

New Mailing Address:

3800 FOWLER STREET
UNIT 6
FORT MYERS, FL 33901

FEI Number: 20-4854420

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SILVA, ANDERSON O
5372 HAWKS LANDING DR
208
FORT MYERS, FL 33907 US

Name and Address of New Registered Agent:

EAGLE TAX REPRESENTATION, CORP
23150 SANDALFOOT PLAZA DRIVE
STE E
BOCA RATON, FL 334286530 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: PAULO OLIVEIRA

03/28/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SILVA, JASIEL A
Address: 1811 SE 19TH LANE
City-St-Zip: CAPE CORAL, FL 33990

Title: VPD () Delete
Name: SILVA, ANDERSON O
Address: 5372 HAWKS LANDING DR # 208
City-St-Zip: FORT MYERS, FL 33907

Title: TD () Delete
Name: SILVA, PATRICIA
Address: 5372 HAWKS LANDING DR # 208
City-St-Zip: FORT MYERS, FL 33907

Title: SD () Delete
Name: SILVA, TEODORA C
Address: 1811 SE 19TH LANE
City-St-Zip: CAPE CORAL, FL 33990

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ROSA, JEFFERSON
Address: 12290 COUNTRY DAY CIRCLE
City-St-Zip: FORT MYERS, FL 33913

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JEFFERSON ROSA

PD

03/28/2007

Electronic Signature of Signing Officer or Director

Date