

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000005333

FILED
Apr 29, 2009
Secretary of State

Entity Name: IGLESIA EVANGELICA "BEREA" CENTROAMERICANA, INC.

Current Principal Place of Business:

1901 BARBARADO RD
W PALM BEACH, FL 33406 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 6505
W PALM BEACH, FL 33405 US

New Mailing Address:

FEI Number: 20-4911926

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VIAJESERVI USA
2905 NW 9 ST
MIAMI, FL 33125 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HERNANDEZ, JUAN PEREZ
Address: P O BOX 6505
City-St-Zip: W PALM BEACH, FL 33405

Title: VP () Delete
Name: HERNANDEZ, EMILIO PEREZ
Address: P O BOX 6505
City-St-Zip: W PALM BEACH, FL 33405

Title: S () Delete
Name: VELASQUEZ PEREZ, C. LEVIPEREZ
Address: P O BOX 6505
City-St-Zip: W PALM BEACH, FL 33405

Title: T () Delete
Name: ORTILIO, RODRIQUEZ
Address: 2112 MERCER AVE
City-St-Zip: W PALM BEACH, FL 33401 US

Title: D () Delete
Name: VELASQUEZ, YONI
Address: 411 EL VEDADO
City-St-Zip: W PALM BEACH, FL 33405 US

Title: PS () Delete
Name: VELASQUEZ, CRISTANTO
Address: 411 EL VEDADO
City-St-Zip: W. PALM BEACH, FL 33405 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: () Change () Addition
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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 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: JUAN HERNANDEZ

P

04/29/2009

Electronic Signature of Signing Officer or Director

Date