

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000007146

FILED  
Jul 19, 2007  
Secretary of State

**Entity Name:** ASOCIACION GLOBAL APOSTOLICA Y PROFETICA EMMANUEL, INC.

**Current Principal Place of Business:**

3001 NW 167 TERRACE  
MIAMI GARDENS, FL 33055

**New Principal Place of Business:**

**Current Mailing Address:**

3001 NW 167 TERRACE  
MIAMI GARDENS, FL 33055

**New Mailing Address:**

**FEI Number:** 26-0553372      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

CRUZ, HUMBERTO  
3001 NW 167 TERRACE  
MIAMI GARDENS, FL 33055      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P      ( ) Delete  
Name: CRUZ, HUMBERTO  
Address: 2980 NW 167 TERRACE  
City-St-Zip: MIAMI, FL 33056

Title: V      ( ) Delete  
Name: CUBAS, ALBERTO  
Address: 15778 NW 10 COURT  
City-St-Zip: PEMBROKE PINES, FL 33028

Title: S      ( ) Delete  
Name: CARRODEGUAS, ANDRES  
Address: 17000 NW 67 AVENUE, #239  
City-St-Zip: HIALEAH, FL 33015

Title: T      ( ) Delete  
Name: RIVERA, ILIA  
Address: 12959 NW 18 MANOR  
City-St-Zip: PEMBROKE PINES, FL 33028

**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  
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: HUMBERTO CRUZ

P

07/19/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date