## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000007362

FILED Apr 30, 2009 Secretary of State

Entity Name: IGLESIA DE AVIVAMIENTO EMMANUEL, INC.

Current Pi	rincipal Place of E	susiness:	New Principal Plac	e ot business:
	167 TERRACE RDENS, FL 33055	US		
Current M	lailing Address:		New Mailing Addre	ss:
	167 TERRACE RDENS, FL 33055	US		
FEI Number:	: 20-5202795 FE	I Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and	Address of Curre	nt Registered Agent:	Name and Address	of New Registered Agent:
	JMBERTO 167 TERRACE RDENS, FL 33055	US		
The above	named entity subm	nits this statement for the p	ourpose of changing its register	red office or registered agent, or both.
	named entity subm e of Florida.	nits this statement for the p	ourpose of changing its register	red office or registered agent, or both,
	e of Florida.	nits this statement for the p	ourpose of changing its register	red office or registered agent, or both,
n the State	e of Florida. RE:	nits this statement for the p		red office or registered agent, or both,  Date
in the State	e of Florida. RE:	gnature of Registered Ag	ent	
in the State	e of Florida.  RE: Electronic Si	gnature of Registered Ago S: te	ent	Date
on the State SIGNATUF  OFFICERS  Title: Name: Address:	e of Florida.  RE: Electronic Si  S AND DIRECTOR  P () Deleted CRUZ, HUMBERTO 2980 NW 167 TERRA	gnature of Registered Agr S: te ACE S	ent  ADDITIONS/CHANG  Title:  Name:  Address:	Date  GES TO OFFICERS AND DIRECTOR
on the State SIGNATUF  OFFICERS  Title: Name: Address: City-St-Zip: Vame: Name: Address:	e of Florida.  RE:  Electronic Si  S AND DIRECTOR  P () Delet CRUZ, HUMBERTO 2980 NW 167 TERRA MIAMI, FL 33056 US  VP () Delet CRUZ, ESTHER 2980 NW 167 TERRA	gnature of Registered Agr S:  te  ACE  ACE  ACE  ACE  ACE  ACE  ACE  AC	ent  ADDITIONS/CHANG  Title: Name: Address: City-St-Zip:  Title: Name: Address:	Date  GES TO OFFICERS AND DIRECTOR  ( ) Change ( ) Addition

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 PRES 04/30/2009