

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000008503

FILED
Mar 30, 2008
Secretary of State

Entity Name: CENTRO DE FE Y AVIVAMIENTO EBENEZER, INC

Current Principal Place of Business:

4283 NW 167 ST
MIAMI, FL 33056

New Principal Place of Business:

Current Mailing Address:

420 JANN AVENUE
2
OPA-LOCKA, FL 33054

New Mailing Address:

FEI Number: 20-5374836

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEREZ, SIXTO
420 JANN AVENUE
2
OPA-LOCKA, FL 33054 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: PEREZ, SIXTO
Address: 420 JANN AVENUE
City-St-Zip: OPA-LOCKA, FL 33054

Title: VP () Delete
Name: CASTILLO, AIDA
Address: 420 JANN AVENUE #2
City-St-Zip: OPA-LOCKA, FL 33054

Title: SECR () Delete
Name: DE JESUS, DAISY M
Address: 412 NE 162 ST
City-St-Zip: N M B, FL 33162

Title: TREA () Delete
Name: DE JESUS, RICHARD
Address: 1436 W 44 TER
City-St-Zip: HIALEAH, FL 33012

Title: VOCA () Delete
Name: CASTILLO, AIDA
Address: 420 JANN AVENUE, #2
City-St-Zip: OPA-LOCKA, FL 33012

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:

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: DAISY DE JESUS

SECR

03/30/2008

Electronic Signature of Signing Officer or Director

Date