

**2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Jul 23, 2008**  
**Secretary of State**

DOCUMENT# N06000012805

**Entity Name:** IGLESIA MANMIN TODA LA CREACION USA INC.**Current Principal Place of Business:**900-B WEST FLAGLER ST.  
SUITE 900B  
MIAMI, FL 33130**New Principal Place of Business:**900-B WEST FLAGLER ST.  
SUITE 900B  
MIAMI, FL 33130**Current Mailing Address:**900-B WEST FLAGLER ST.  
SUITE 900B  
MIAMI, FL 33130**New Mailing Address:****FEI Number:** 20-8194152      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**HANDAL, ESTEBAN J  
900-B WEST FLAGLER ST.  
MIAMI, FL 33130 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:** HANDAL, ESTEBAN J  
**Address:** 900-B WEST FLAGLER ST.  
**City-St-Zip:** MIAMI, FL 33130**Title:** VP      ( ) Delete  
**Name:** HAN DAL, MARIA I  
**Address:** 900-B WEST FLAGLER ST.  
**City-St-Zip:** MIAMI, FL 33130**Title:** S      ( ) Delete  
**Name:** HANDAL, MARIA I  
**Address:** 900-B WEST FLAGLER ST.  
**City-St-Zip:** MIAMI, FL 33130**Title:**      ( ) Delete  
**Name:**  
**Address:**  
**City-St-Zip:****Title:**      ( ) Delete  
**Name:**  
**Address:**  
**City-St-Zip:****ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** P/D      (X) Change ( ) Addition  
**Name:** HANDAL, ESTEBAN J PASTOR  
**Address:** 900-B WEST FLAGLER ST.  
**City-St-Zip:** MIAMI, FL 33130**Title:** VP/D      (X) Change ( ) Addition  
**Name:** LOVE, NORMA MS.  
**Address:** 5106 ATLANTIS TERRACE  
**City-St-Zip:** ARLINGTON, TX 76016 US**Title:** S/D      (X) Change ( ) Addition  
**Name:** BUTTERWORTH, JOHN MR.  
**Address:** 25489 ALSEA-DEADWOOD HIGHWAY  
**City-St-Zip:** ALSEA, OR 97324 US**Title:** T/D      ( ) Change (X) Addition  
**Name:** WOOD, JEFFERY L MR.  
**Address:** 1711 HIGHWAY 17 S.      UNIT 104  
**City-St-Zip:** SURFSIDE BEACH, SC 29575 US**Title:** D      ( ) Change (X) Addition  
**Name:** GOMEZ, ALEXANDRA MS.  
**Address:** 23914 NOMINI HALL LANE  
**City-St-Zip:** KATY, TX 77493 US

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: ROBERT E. LEVINE, AS COUNSEL

ATTY

07/23/2008

Electronic Signature of Signing Officer or Director

Date