2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Mar 31, 2008 8:00 am DOCUMENT # N07000000392 **Secretary of State** 1. Entity Name 03-31-2008 90033 035 ****70.00 IGLESIA BAUTISTA HAY UNA ESPERANZA EN JESUCRISTO, INC. Principal Place of Business Mailing Address 10908 PEPPERSONG DR 10908 PEPPERSONG DR RIVERVIEW FL 33569 RIVERVIEW FL 33569 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 204 Lenna Ave. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/07) 4. FEI Number City & State Applied For 20-8227012 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 33584 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent RODRIGUEZ, JESUS T Street Address (P.O. Box Number is Not Acceptable) 10908 PEPPERSONG DR RIVERVIEW FL 33569 Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. 4.13.0B SIGNATURE Sessies Palricorz (NOTE: Registered Agent signature reduced wherereinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be 74. j Due By May 1, 2008 Trust Fund Contribution. Florida Department of State Added to Fees bhai vin h 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE TIT: F ☐ Delete . Change ■ Addition RODRIGUEZ, JESUS T NAME NAME 10908 PEPPERSONG DR STREET ADDRESS STREET ADDRESS RIVERVIEW FL 33569 CITY-ST-ZIP CITY-ST-ZIP Delate TITLE TITLE ☐ Change ■ Addition RODRIGUEZ, GENARO NAME NAME 4719 CORK ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PLANT CITY FL 33565 015Y-55-7/P Delete TITLE TITLE Change Addition RODRIGUEZ, BELINDA J NAME NAME 4719 CORK ROAD STREET ADDRESS STREET ADDRESS PLANT CITY FL 33565 CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Dalete ☐ Change Secretaria TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-78P CITY-ST-ZIP TITLE ☐ Delete TITLE Change Youth Paster ■ Addition NAME MAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P TITLE Delete ☐ Change TITLE Addition NAME NAME Jorge Navarro STREET ADDRESS CITY-SI-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information

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indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

813-817-7432 cells SIGNATURE: