2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000000857

FILED Apr 17, 2008 Secretary of State

Entity Name: PRIMEIRA IGREJA ASSEMBLEIA DE DEUS BRASILEIRA EM FORT MYERS, INC.

Current Principal Place of Business: New Principal Place of Business:

3106 BROADWAY AVENUE FORT MYERS, FL 33901

Current Mailing Address: New Mailing Address:

3106 BROADWAY AVENUE FORT MYERS, FL 33901

FEI Number: 65-0962538 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

MOUTELA, LUIS A ARBIGAUS, TEDI M
12581 EQUESTRIAN CIRCLE APR. 1009 3550 WORK DRIVE

FORT MYERS, FL 33907 US A-3 FORT MYERS, FL 33916 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: TEDI M ARBIGAUS 04/17/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

 Name:
 MOUTELA, LUIZ
 Name:
 ARBIGAUS, TEDI M

 Address:
 12581 EQUESTRIAN CIRCLE APR. 1009
 Address:
 3550 WORK DRIVE # A-3

 City-St-Zip:
 FT MYERS, FL 33907
 City-St-Zip:
 FT MYERS, FL 33916

Title: VPD () Delete Title: () Change () Addition

 Name:
 LUQUEZ, SALVADOR
 Name:

 Address:
 3715 10TH ST W
 Address:

 City-St-Zip:
 LEHIGH ACRES, FL 33971
 City-St-Zip:

Name: DE OLIVEIRA, JOAQUIM Name: MACHADO, WAGNER

 Address:
 18271 LINDEN RD
 Address:
 1520 SONOMA DRIVE BLDG 8 # 103

 City-St-Zip:
 FT MYERS, FL 33912
 City-St-Zip:
 FT MYERS, FL 33908

Title: SD () Delete Title: () Change () Addition

 Name:
 BOAVENTURA, OSIEL
 Name:

 Address:
 3647 PINE OAK CIR #104
 Address:

 City-St-Zip:
 FT MYERS, FL 33916
 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: TEDI M ARBIGAUS P 04/17/2008