2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2009
Secretary of State

DOCUMENT# N07000008422

Entity Name: CONCILIO DE IGLESIAS CRISTIANAS BEREA UNIDOS EN LA FE M.I., INC.

Current Principal Place of Business:

15820 N.W. 45TH AVENUE
MIAMI GARDENS, FL 33054

New Principal Place of Business:

Current Mailing Address:

15820 N.W. 45TH AVENUE
MIAMI GARDENS, FL 33054

New Mailing Address:

FEI Number: 26-0786635 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SOTO, DIEGO
15820 N.W. 45TH AVENUE
MIAMI GARDENS, 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: DP ( ) Delete
Name: CARDONA, CARMEN
Address: 15820 N.W. 45TH AVENUE
City-St-Zip: MIAMI GARDENS, FL 33054

Title: VP ( ) Delete
Name: PLAZA, RAMON
Address: 700 N 69 AVENUE
City-St-Zip: HOLLYWOOD, FL 33024

Title: SC ( ) Delete
Name: SOLORZANO, AMPARO
Address: 15820 N.W. 45TH AVENUE
City-St-Zip: MIAMI GARDENS, FL 33054

Title: T ( ) Delete
Name: SOTO, DIEGO
Address: 15820 N.W. 45TH AVENUE
City-St-Zip: MIAMI GARDENS, FL 33054

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:

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: CARMEN CARDONA P 04/28/2009

Electronic Signature of Signing Officer or Director — Date