2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000008845

City-St-Zip:

MIAMI, FL 33175

FILED Mar 24, 2009 Secretary of State

Entity Name: IGLESIA CRISTIANA DE MIAMI, INC. **Current Principal Place of Business: New Principal Place of Business:** 714 N.W. 129 COURT 13100 SW 59TH ST MIAMI, FL 33182 MIAMI, FL 33183 **Current Mailing Address: New Mailing Address:** PO BOX 942046 MIAMI, FL 33194 US FEI Number: 26-0890588 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SALERMO, DIANA M SALERMO, DIANA M 714 N.W. 129 COURT 663 N.W. 129 COURT MIAMI, FL 33182 MIAMI, FL 33182 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: 03/24/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete PADILLA, FELIX A Name: Name: Address: 16171 SW 78TH ST. Address: City-St-Zip: MIAMI, FL 33193 City-St-Zip: Title: Title: () Delete (X) Change () Addition Name: ANGULO, ABEL Name: ANGULO, ABEL Address: 11840 S.W. 18TH TERR 92 Address: 11840 S.W. 18TH TER APT.92 City-St-Zip: MIAMI, FL 33175 City-St-Zip: MIAMI, FL 33175 Title: () Delete Title: (X) Change () Addition SALERMO, DIANA M SALERMO, DIANA M Name: Name: 714 N.W. 129 COURT Address: Address: 663 N.W. 129 COURT City-St-Zip: MIAMI, FL 33182 City-St-Zip: MIAMI, FL 33182 Title: () Delete Title: () Change () Addition FERRERO, AIDA Name: Name: Address: 11840 SW 18TH TER., APT.92 Address:

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.

City-St-Zip:

SIGNATURE: ABEL ANGULO D 03/24/2009