

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000010631

FILED
Sep 12, 2008
Secretary of State

Entity Name: IGLESIA SHALOM FUENTE DE VIDA, INC

Current Principal Place of Business:

1530 FOREST HILL BLVD
4
WEST PALM BEACH, FL 33406 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 22051
WEST PALM BEACH, FL 33416 US

New Mailing Address:

FEI Number: 26-1345313 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

QUINONEZ, WANDA
1530 FOREST HILL BLVD
4
WEST PALM BEACH, FL 33406 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: QUINONEZ, WANDA
Address: 1530 FOREST HILL BLVD #4
City-St-Zip: WEST PALM BEACH, FL 33406 US

Title: VP () Delete
Name: RODRIGUEZ, JOSE
Address: 1053 ASPRI WAY
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: WANDA QUINONEZ

PRES

09/12/2008

Electronic Signature of Signing Officer or Director

Date