## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N07000011393

FILED Apr 16, 2009 Secretary of State

Entity Name: IGLESIA MISIONERA FUENTE DE VIDA, CORP.

Surrent P	rincipal Place of	Business:	New Principal P	lace of Business:
3844 NW OPA LOC	125 ST. KA, FL 33054			
<b>Current Mailing Address:</b> 3844 NW 125 ST. OPA LOCKA, FL 33054		New Mailing Add	New Mailing Address: 1325 NW 182 ST. MIAMI, FL 33169	
FEI Number	r: 06-1830717	FEI Number Applied For()	FEI Number Not Applicable (	) Certificate of Status Desired (X)
Name and	d Address of Cur	rent Registered Agent:	Name and Addre	ess of New Registered Agent:
PEREZ, E 1325 NW MIAMI, FL	182 ST.			
	e named entity sub e of Florida.	omits this statement for the p	ourpose of changing its regis	stered office or registered agent, or both,
	e of Florida.	mits this statement for the p	ourpose of changing its regis	stered office or registered agent, or both,
n the Stat	e of Florida. RE:	omits this statement for the positions of the positions of Registered Ago		Stered office or registered agent, or both,  Date
in the Stat	e of Florida. RE:	Signature of Registered Ag	ent	
n the Stat	e of Florida.  RE: Electronic	Signature of Registered Ago RS:	ent	Date
n the Stati SIGNATU DFFICER Fitle: Name: Address:	e of Florida.  RE: Electronic  S AND DIRECTO  PD () De PEREZ, ERNESTO 3844 NW 125 ST.	Signature of Registered Ago RS: elete 3054 elete S	ent  ADDITIONS/CHA  Title: Name: Address:	Date ANGES TO OFFICERS AND DIRECTOR
n the Stati BIGNATU  DFFICER  Title: Name: Address: City-St-Zip: Title: Name: Address:	e of Florida.  RE: Electronic  S AND DIRECTO  PD () De PEREZ, ERNESTO 3844 NW 125 ST. OPA LOCKA, FL 3  VD (X) De MONTIEL, CARLO 3844 NW 125 ST.	Signature of Registered Agr RS: elete 3054 elete S 3054	ent  ADDITIONS/CHA  Title: Name: Address: City-St-Zip: Title: Name: Address:	Date ANGES TO OFFICERS AND DIRECTOR  ( ) Change ( ) Addition

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: ERNESTO PEREZ PD 04/16/2009