## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N0800000052

FILED Mar 05, 2009 Secretary of State

Entity Name: IGLESIA DE DIOS PENTECOSTAL ROSA DE SARON ALPHA & OMEGA, INC.

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

3660 NE 166TH STREET OPALOCKA, FL 33054

SUITE 115

NORTH MIAMI BEACH, FL 33160

**Current Mailing Address:** New Mailing Address:

20200 NE 29 CT CPT #N 216 3660 NE 166TH STREET

AVENTURA, FL 33180 SUITE 115

NORTH MIAMI BEACH, FL 33160

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

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

HERNANDEZ, LINO E REV MARQUEZ, DAVID 3660 NE 166TH STREET 900 W DR

OPALOCKA, FL 33054 SUITE 115 NORTH MIAMI BEACH, FL 33160 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.

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

SIGNATURE: DAVID MARQUEZ

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

03/05/2009

(X) Change ( ) Addition () Delete

HERNANDEZ, LINO E REV MARQUEZ, NOHEMI Name: Name: 20200 NE 29 CT APT #N 216 Address: 3660 NE 166TH STREET, SUITE 115 Address:

City-St-Zip: OPALOCKA, FL 33054 City-St-Zip: MIAMI, FL 33010

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

MARQUEZ, DAVID LIC Name: Name: Address: 3660 NE 166 ST #115 Address: City-St-Zip: NORTH MIAMI BEACH, FL 33160 City-St-Zip:

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

CEPEDA, NOEMI Name: Name: 3660 NE 166 ST 115 Address: Address: City-St-Zip: NORTH MIAMI BEACH, FL 33160 City-St-Zip:

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

TEJEDA, EX. AMIRCAR Name: Name: Address: 900 W DR Address: City-St-Zip: OPALOCKA, FL 33054 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: DAVID MARQUEZ PAST 03/05/2009