## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N08000002298

FILED Feb 21, 2009 Secretary of State

Entity Name: IGREJA RESTAURANDO VIDAS INTERNATIONAL MISSIONARY, INC

Current Principal Place of Business:				New Principal Place of Business:		
1490 SOUTH MILITARY TRAIL SUITE 9 WEST PALM, FL 33415				1963 S. MILITARY TRAIL WEST PALM BEACH, FL 33415		
Current Mailing Address:				New Mailing Address:		
1905 CAPESIDE CIRCLE WELLINTON, FL 33414				1905 CAPESIDE CIRCLE WELLINGTON, FL 33414		
FEI Number: 26-2899065 FEI Number Applied For ( ) FEI Numb				nber Not Applicable ( ) Certificate of Status Desired (X)		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
ZESIV, TANIA 1905 CAPESIDE CIRCLE WELLINGTON, FL 33414 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:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P () E ZESIV, RONALDO 1905 CAPESIDE WELLINGTON, F	CIRCLE		Title: Name: Address: City-St-Zip:	() Change(	) Addition
Title: Name: Address: City-St-Zip:	VP () E ZESIV, TANIA 1905 CAPESIDE WELLINGTON, F			Title: Name: Address: City-St-Zip:	() Change(	) Addition
Title: Name: Address: City-St-Zip:	S ()E MORAES, LILIA 2960 KIRK RD LAKEWORTH, FL	Delete - 33461		Title: Name: Address: City-St-Zip:	() Change(	) Addition
Title: Name: Address: City-St-Zip:	T () E TORTELLI, ELISA 151 BALDWIN BI GREENACRES, F	_V		Title: Name: Address: City-St-Zip:	() Change(	) Addition
Title: Name: Address: City-St-Zip:	C () E TSIANTOS, EDEL 120 NORTH M ST LAKEWORTH, FL	REET APT D		Title: Name: Address: City-St-Zip:	() Change (	) Addition
Title: Name: Address: City-St-Zip:	C () E TINOCO, MARIAH 129 NORTH M ST LAKEWORTH, FL	REET APT D	!	Title: Name: Address: City-St-Zip:	() 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.						

Electronic Signature of Signing Officer or Director

SIGNATURE: TANIA ZESIV

Date

02/21/2009

VΡ