

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000009290

FILED
May 18, 2009
Secretary of State

Entity Name: IGLESIA EVANGELICA PALABRA DE VIDA ABUNDANTE, INC.

Current Principal Place of Business:

15351 SW 194 AVE
MIAMI, FL 33187

New Principal Place of Business:

Current Mailing Address:

15351 SW 194 AVE
MIAMI, FL 33187

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) 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:

ALVAREZ, DAMARIS
15351 SW 194 AVE
MIAMI, FL 33187 US

Name and Address of New Registered Agent:

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: ALVAREZ, JORGE F
Address: 15351 SW 194 AVE
City-St-Zip: MIAMI, FL 33187

Title: S () Delete
Name: ALVAREZ, DAMARIS
Address: 15351 SW 194 AVE
City-St-Zip: MIAMI, FL 33187

Title: T () Delete
Name: ALVAREZ, MARIA E
Address: 16540 SW 157 AVE
City-St-Zip: MIAMI, FL 33187

Title: D () Delete
Name: ACOSTA, EFRAIN JR
Address: 2214 W 74 TERRACE
City-St-Zip: HIALEAH, FL 33016

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JORGE F ALVAREZ

P

05/18/2009

Electronic Signature of Signing Officer or Director

Date