

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 17, 2008 08:00 A
Secretary of State

DOCUMENT # N11300

1. Entity Name
RADIO LA HORA DE DIOS, INC.



Principal Place of Business
3209-A N. ARMENIA AVENUE
TAMPA, FL 33607

Mailing Address
3209-A N. ARMENIA AVENUE
TAMPA, FL 33607



02252008 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2965303

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

RODRIGUEZ, JOHN
3209 N. ARMENIA AVENUE
TAMPA, FL 33607

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
D
AMARO, JOSE A.
STREET ADDRESS
3212 W. ABDELLA STREET
CITY- ST- ZIP
TAMPA, FL

TITLE
NAME
D
DIAZ, ISMAEL
STREET ADDRESS
6421 SOLANO CT., #123
CITY- ST- ZIP
TAMPA, FL

TITLE
NAME
D
RODRIGUEZ, JOHN
STREET ADDRESS
3209 N. ARMENIA AVENUE
CITY- ST- ZIP
TAMPA, FL

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

[Signature] **D. JOSE RODRIGUEZ** 3/14/08.