2005 NOT-FOR-PROFIT CORPORATION

FILED **ANNUAL REPORT** Apr 30, 2005 08:00 AM **DOCUMENT # N14460** Secretary of State 1. Entity Name IGLESIA VISIONERA MISIONERA PENTECOSTAL INC. Principal Place of Business, Mailing Address 6126 HANSEL AVE 6126 HANSEL AVE C/O VALERIA N. TORRES C/O VALERIA N. TORRES ORLANDO, FL 32809 ORLANDO, FL 32809 CR2E037 (10/03) 04222005 No Chg-NP DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number NOT APPLICABLE Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent TORRES, VALERIA N. 659 MARQUAND STREET DO NOT WRITE ORLANDO, FL 32809 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 this if applicable (NOTE Registered Agent signature required when reinstating) 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be Added to Fees U00000346360 Trust Fund Contribution. Due by May 1, 2005 30/05-80075-004 OFFICERS AND DIRECTORS 10. TITLE TORRES, WILLIAM V. NAME STREET ADDRESS 659 MARQUAND ST., CITY-ST-ZIP ORLANDO, FL TITLE TORRES, VALERIA N. NAME STREET ADDRESS 659 MARQUAND ST., CITY-ST-ZIP ORLANDO, FL TITLE NAME ISMAEL, CALDERON STREET ADDRESS 620 BIARRTZ COURT DO NOT WRITE CITY-ST-ZIP ORLANDO, FL

CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Fiorida 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:

MORROBEL, MARIVI A.

659 MARQUAND ST.,

ORLANDO, FL

TILE

NAME STREET ADDRESS

TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

CITY - ST-ZIP

NG OFFICER OR DIRECTOR

IN THIS SPACE

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