

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Feb 09, 2009  
Secretary of State**

DOCUMENT# N15021

Entity Name: IGLESIA BAUTISTA DE NORTH MIAMI, INC.

**Current Principal Place of Business:**

15395 NORTH MIAMI AVE  
MIAMI, FL 33169 US

**New Principal Place of Business:**

**Current Mailing Address:**

15395 NORTH MIAMI AVE  
MIAMI, FL 33169 US

**New Mailing Address:**

FEI Number: 65-0138009      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

PEREDA, JOSE I.  
46 NE 171 TERR  
NO MIAMI BCH, FL 33162 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: PD ( ) Delete  
Name: PEREDA, JOSE I PASTOR  
Address: 46 NE 171 TERR  
City-St-Zip: NO MIAMI BCH, FL 33162 US

Title: TD ( ) Delete  
Name: SIERRA, GERARDO  
Address: 1941 NE 158 ST  
City-St-Zip: MIAMI, FL 33162 US

Title: SD ( ) Delete  
Name: DAVIS, YETTI  
Address: 1941 NE 158 STREET  
City-St-Zip: MIAMI, FL 33162 US

Title: TD ( ) Delete  
Name: CHAVEZ, JORGE  
Address: 1811 NW 135 STREET  
City-St-Zip: MIAMI, FL 33167

**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: JOSE I. PEREDA

PD

02/09/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date