2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15550

FILED Jan 24, 2007 Secretary of State

Entity Name: IGLESIA EVANGELICA DIA DE PENTECOSTES, INC.

Current Principal Place of Business: New Principal Place of Business:

3535 WEST 8TH AVE 88 WEST 9 STREET HIALEAH, FL 33012 HIALEAH, FL 33010

Current Mailing Address: New Mailing Address:

FEI Number: 59-2693147 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CASTRO, HECTOR M.

3535 W. 8TH AVE.

HIALEAH, FL 33012 US

CASTRO, HECTOR M PD
3535 WEST 8TH AVENUE
HIALEAH, FL 33012 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: HECTOR M. CASTRO 01/24/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD () Delete
 Title:
 PD (X) Change () Addition

 Name:
 CASTRO, HECTOR M.,
 Name:
 CASTRO, HECTOR M PD

 Address:
 3535 WEST 8TH AVE
 Address:
 3535 WEST 8TH AVENUE

 City-St-Zip:
 HIALEAH, FL
 33012

Title: VD () Delete Title: VD (X) Change () Addition Name: CASTRO, CIRA A., Name: CASTRO, CIRA A VD

 Name:
 CASTRO, CIRA A.,
 Name:
 CASTRO, CIRA A VD

 Address:
 3535 WEST 8TH AVE.
 Address:
 3535 WEST 8TH AVENUE.

 City-St-Zip:
 HIALEAH, FL
 City-St-Zip:
 HIALEAH, FL
 33012

Title: SD () Delete Title: () Change () Addition

 Name:
 HERNANDEZ, DANIEL
 Name:

 Address:
 11991 SW 195 STREET
 Address:

 City-St-Zip:
 MIAMI, FL 33177
 City-St-Zip:

Title: TD () Delete Title: TD (X) Change () Addition

 Name:
 RASKY, MARIA DE J
 Name:
 RASKY, MARIA D TD

 Address:
 3535 W. 8TH AVE
 Address:
 3535 WEST 8TH AVENUE

 City-St-Zip:
 HIALEAN, FL
 City-St-Zip:
 HIALEAH, FL
 33012

I hereby certify that the information supplied with this filing does not qualify for the 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: HECTOR M. CASTRO PD 01/24/2007