

2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Sep 26, 2006
Secretary of State**

DOCUMENT# N15847

Entity Name: IGLESIA CRISTO ROMPE LAS CADENAS DEL EVANGELIO COMPLETO, INC.**Current Principal Place of Business:**3899 N.W. 7TH STREET
SUITE 216
MIAMI, FL 33126 US**New Principal Place of Business:****Current Mailing Address:**3899 N.W. 7TH STREET
SUITE 216
MIAMI, FL 33126 US**New Mailing Address:****FEI Number:** 59-2693858 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**ABDO, GEORGE B.
3899 N.W. 7TH ST STE 216
MIAMI, FL 33126 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: ABDO, GEORGI B
Address: 410 S.W. 136TH PLACE
City-St-Zip: MIAMI, FL 33114**Title:** VPD () Delete
Name: CALVEIRO, JULIO
Address: 5020 N.W. 188TH TERRACE
City-St-Zip: MIAMI, FL**Title:** VSD () Delete
Name: CASTELLON, RODOLFO
Address: 235 E. 7TH STREET
City-St-Zip: HIALEAH, FL 33012**Title:** STD () Delete
Name: PONS, GLADIS
Address: 225 N.W. 32ND COURT
City-St-Zip: MIAMI, FL 33125**Title:** VTD () Delete
Name: OTERO, OBED
Address: 10017 EASTERN LAKE AVE. #104
City-St-Zip: ORLANDO, FL 32817**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** P (X) Change () Addition
Name: ABDO, GEORGI B
Address: 410 S.W. 136TH PLACE
City-St-Zip: MIAMI, FL 33114**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:** VTD (X) Change () Addition
Name: OTERO, OBED
Address: 8129 GOLDEN CHICKASAW CIRCLE
City-St-Zip: ORLANDO, FL 32825

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: OBED OTERO

VTD

09/26/2006

Electronic Signature of Signing Officer or Director

Date