2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20800

FILED Jan 14, 2008 Secretary of State

Entity Name: HEBRON INDIA PENTECOSTAL CHURCH OF GOD, INC.

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
	ATE ROAD 7			
SUITE 29 FT. LAUDE	ERDALE, FL 333146446			
Current Mailing Address:		New Mailing Addres	New Mailing Address:	
5450 S. ST	ATE ROAD 7			
SUITE 29 FT. LAUDE	ERDALE, FL 333146446			
FEI Number:	FEI Number Applied For ()	FEI Number Not Applicable (X)	Certificate of Status Desired (X)	
Name and	Address of Current Registered Agent	: Name and Address o	of New Registered Agent:	
	ESE, MATHEW 7. 27TH CT. 33328 US			
	named entity submits this statement for t e of Florida.	the purpose of changing its registere	d office or registered agent, or both,	
SIGNATUF				
	Electronic Signature of Registered	Agent	Date	
OFFICERS	S AND DIRECTORS:	ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	VTD () Delete THOMAS, JOHN, 8360 NW 21ST CT SUNRISE, FL	Title: Name: Address: City-St-Zip:	() Change () Addition	
	D () D-1-4-			
Title: Name: Address: City-St-Zip:	D () Delete DANIEL, THOMAS 5743 TYLER STREET HOLLYWOOD, FL 33021	Title: Name: Address: City-St-Zip:	() Change () Addition	
Name: Address:	DANIEL, THOMAS 5743 TYLER STREET	Name: Address:	() Change () Addition () Change () Addition	
Name: Address: City-St-Zip: Title: Name: Address:	DANIEL, THOMAS 5743 TYLER STREET HOLLYWOOD, FL 33021 PD () Delete CHACKO, POTHEN K., 5360 LANCELOT LANE	Name: Address: City-St-Zip: Title: Name: Address:		
Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	DANIEL, THOMAS 5743 TYLER STREET HOLLYWOOD, FL 33021 PD () Delete CHACKO, POTHEN K., 5360 LANCELOT LANE DAVIE, FL D () Delete VARGHESE, JIBY, 10700 SW 27TH CT	Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	() Change () Addition	

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: MATHEW VARUGHESE SD 01/14/2008