

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32369

FILED  
Feb 06, 2008  
Secretary of State

Entity Name: IGLESIA CASA DE ADORACION, INC.

## Current Principal Place of Business:

25201 SW 137 AVE  
PRINCETON, FL 33032 US

## New Principal Place of Business:

## Current Mailing Address:

C/O MANUEL CRUZ  
PO BOX 570945  
MIAMI, FL 33257 US

## New Mailing Address:

FEI Number: 65-0127569      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CRUZ, MANUEL  
19655 SW 87TH PLACE  
MIAMI, FL 33157 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: CRUZ, MANUEL,  
Address: 19655 SW 87TH PL  
City-St-Zip: MIAMI, FL

Title: STD ( ) Delete  
Name: ORONA, RAFAEL,  
Address: 9761 SW 211 ST.  
City-St-Zip: MIAMI, FL

Title: S ( ) Delete  
Name: MABEL RUIZ,  
Address: 20424 SW 85 AVE  
City-St-Zip: MIAMI, FL

Title: AVP ( ) Delete  
Name: SUZETTE, LOPEZ M  
Address: 14536 SW 161 PLACE  
City-St-Zip: MIAMI, FL

Title: AVP ( ) Delete  
Name: CRUZ, MICHELLE M  
Address: 9760 SW 211TH ST.  
City-St-Zip: MIAMI, FL 33189

Title: VD ( ) Delete  
Name: CRUZ, MARIA E  
Address: 19655 SW 87 PL.  
City-St-Zip: MIAMI, FL 33157

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: STD (X) Change ( ) Addition  
Name: LOPEZ, ANTHONY,  
Address: 14536 SW 161 PL  
City-St-Zip: MIAMI, FL 33196

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: MANUEL CRUZ

DIRE

02/06/2008

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

\_\_\_\_\_  
Date