

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32820

FILED  
Mar 23, 2007  
Secretary of State

**Entity Name:** TEMPLO CALVARIO ASAMBLEAS DE DIOS DE MIAMI, INC.

**Current Principal Place of Business:**

8306 MILLS DR., #136  
MIAMI, FL 33183

**New Principal Place of Business:**

**Current Mailing Address:**

8306 MILLS DR., #136  
MIAMI, FL 33183

**New Mailing Address:**

**FEI Number:** 65-0146823

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MOORE, DAVID L  
8306 MILLS DR., #136  
MIAMI, FL 33183 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: MOORE, DAVID L  
Address: 7700 SW 127TH DR  
City-St-Zip: MIAMI, FL

Title: TD ( ) Delete  
Name: SOSA, MARIA E  
Address: 14381 SW 28TH ST  
City-St-Zip: MIAMI, FL 33175

Title: SD ( ) Delete  
Name: GONZALEZ, NORA E  
Address: 10395 SW 28TH ST  
City-St-Zip: MIAMI, FL 33165

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: TD (X) Change ( ) Addition  
Name: SOSA, MARIA E  
Address: 8808 NW 110 ST  
City-St-Zip: HIALEAH GARDENS, FL 33018

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

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: DAVID L. MOORE

PD

03/23/2007

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

\_\_\_\_\_  
Date