2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35032

FILED May 02, 2007 Secretary of State

Entity Name: EL FARO ASSEMBLY OF GOD OF LA BELLE, INC.

Current Principal Place of Business: New Principal Place of Business: 431 BRYAN AVE 431 BRYAN AVE LABELLE, FL 33935 US P.O. BOX 1152 LABELLE, FL 33935 US **New Mailing Address: Current Mailing Address:** P.O BOX 1152 LA BELLE, FL 33975 US FEI Number: 65-0213054 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: VALENTIN, ISABEL VALENTIN, ISABEL REV 210 S. HICKORY STREET 210 S. HICKORY STREET P.O BOX 1152 P.O BOX 1152 LA BELLE, FL 33975 US LA BELLE, FL 33975 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: REV. ISABEL VALENTIN 05/02/2007 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete VALENTIN, ISABEL REV. Name: Name: 210 S HICKORY STREET Address: Address: City-St-Zip: LA BELLE, FL 33935 City-St-Zip: Title: () Delete Title: () Change () Addition Name: RAMIREZ, RAFEAL J Name: Address: 4012 N.E. EDEWATER CIRCLE Address: City-St-Zip: LABELLE, FL 33935 City-St-Zip: Title: () Delete Title: (X) Change () Addition GONZALEZ, DANIEL, Name: GONZALEZ, DANIEL Name: 1290 EVANS RD. Address: Address: 1290 EVANS RD City-St-Zip: LA BELLE, FL City-St-Zip: LA BELLE, FL Title: SD () Delete Title: () Change () Addition AGUIRRE, RIGOBERTO Name: Name: 565 SUSAN AVENUE Address: Address: City-St-Zip: LABELLE, FL 33935 City-St-Zip: Title: () Delete Title: TD (X) Change () Addition MAXIMILIANO, MARTINEZ MARTINEZ, MAXIMILIANO Name: Name: 431 BRYAN AVENUE - PO BOX 2721 431 BRYAN AVENUE - PO BOX 2721 Address: Address: City-St-Zip: LABELLE, FL 33975 City-St-Zip: LABELLE, FL 33975

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: REV. ISABEL VALENTIN P/D 05/02/2007