

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36735

FILED
Jan 23, 2008
Secretary of State

Entity Name: MARANATHA ASSEMBLIES OF GOD INC.

Current Principal Place of Business:

980 SW 82 AVE
MIAMI, FL 33144

New Principal Place of Business:

Current Mailing Address:

PO BOX 351433
MIAMI, FL 33135

New Mailing Address:

FEI Number: 65-0229212

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DESVERGUNAT, LAZARO
2990 SW 19TH STREET
MIAMI, FL 33145 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: DESVERGUNAT, LAZARO
Address: 2990 SW 19 ST
City-St-Zip: MIAMI, FL 33145

Title: SD () Delete
Name: DESVERGUNAT, ILEANA S
Address: 2990 SW 19 STREET
City-St-Zip: MIAMI, FL 33145

Title: TD () Delete
Name: GUEVARA, JOSE A
Address: 3170 SW 8 STREET
City-St-Zip: MIAMI, FL 33135

Title: O (X) Delete
Name: DESVERGUNAT, JONATHAN
Address: 2990 SW 19TH STREET
City-St-Zip: MIAMI, FL 33145

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: TD (X) Change () Addition
Name: DESVERGUNAT, JONATHAN
Address: 2990 SW 19TH STREET
City-St-Zip: MIAMI, FL 33145

Title: O (X) Change () Addition
Name: GUEVARA, JOSE A
Address: 3170 SW 8 STREET
City-St-Zip: MIAMI, FL 33135

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: LAZARO DESVERGUNAT

PD

01/23/2008

Electronic Signature of Signing Officer or Director

Date