2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N38914

FILED Jan 28, 2009 Secretary of State

Entity Name: IGLESIA LUTERANA SAN PEDRO, INC.

Current Principal Place of Business: New Principal Place of Business: 3360 WEST FLAGLER ST. 3360 W. FLAGLER ST. MIAMI, FL 33135 US MIAMI, FL 33135 **Current Mailing Address: New Mailing Address:** 3360 WEST FLAGLER ST. 3360 W. FLAGLER ST. MIAMI, FL 33135 MIAMI, FL 33135 FEI Number: 05-0032978 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PEREZ, EDDY F REV 3360 WEST FLAGLER ST. MIAMI, FL 33135 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: PAST () Change () Addition () Delete PEREZ, EDDY F REV. Name: Name: 3360 W. FLAGLER ST. Address: Address: City-St-Zip: MIAMI, FL 33135 City-St-Zip: Title: PRES () Delete Title: (X) Change () Addition ECHEVARRIA, FELIX Name: ECHEVARRIA, HUGO Name: Address: 1225 SW 107 AVE. APT 223 Address: 410 SW 32 AVE City-St-Zip: MIAMI, FL 33174 City-St-Zip: MIAMI, FL 33135 Title: () Delete Title: (X) Change () Addition MUINA, EDUARDO COMAS, JOSE Name: Name: 6631 SW 2ND ST 10854 SW 88 ST APT 409 Address: Address: City-St-Zip: MIAMI, FL 33144 City-St-Zip: MIAMI, FL 33176 Title: TD (X) Delete Title: () Change () Addition Name: COMAS, JOSE Name: 10854 SW 88 ST APT 409 Address: Address: City-St-Zip: MIAMI, FL 33176 City-St-Zip: Title: (X) Delete Title: () Change () Addition ECHEVARRIA, HUGO Name: Name: 410 SW 32 AVE Address: Address: City-St-Zip: MIAMI, FL 33135 City-St-Zip: Title: MEMB (X) Delete Title: () Change () Addition LLORENTE, RAFAEL Name: Name: Address: 410 SW 32 AVE Address: MIAMI, FL 33135 City-St-Zip: 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: REV. EDDY F. PEREZ PAST 01/28/2009