

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42293

FILED
Mar 22, 2007
Secretary of State

Entity Name: IGLESIA EVANGELICA MONTE CALVARIO, INC.

Current Principal Place of Business:

11809 NE FIRST AVE
MIAMI, FL 33161 US

New Principal Place of Business:

3351 NW 87 STREET
MIAMI, FL 33147 US

Current Mailing Address:

% 435 NORTHWEST 121ST STREET
NORTH MIAMI, FL 33168 US

New Mailing Address:

3351 NW 87 STREET
MIAMI, FL 33147 US

FEI Number: 65-0250529

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZUNIGA, ABRAHAM
435 N.W. 121 STREET
NORTH MIAMI, FL 33168 US

Name and Address of New Registered Agent:

OSVALDO, SOCA
3351 NW 87 STREET
MIAMI, FL 33147 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: OSVALDO SOCA

03/22/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ZUNIGA, ABRAHAM
Address: 435 N.W. 121 ST.
City-St-Zip: NORTH MIAMI, FL 33168

Title: SD () Delete
Name: EBANKS, DAISY
Address: 1433 NW 28TH STREET
City-St-Zip: MIAMI, FL 33142

Title: TD () Delete
Name: ZUNIGA, MARY E
Address: 435 N.W. 121 ST.
City-St-Zip: NORTH MIAMI, FL 33168

Title: VD (X) Delete
Name: CARDENAS, VICTOR
Address: 12205 N.W. 2ND AVE
City-St-Zip: NORTH MIAMI, FL 33168

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: OSVALDO, SOCA
Address: 3251 NW 87 STREET
City-St-Zip: MIAMI, FL 33147

Title: VP (X) Change () Addition
Name: ROMELIA, MONDUY
Address: 3251 NW 87 STREET
City-St-Zip: MIAMI, FL 33147

Title: TD (X) Change () Addition
Name: VICTOR, CARDENAS
Address: 12205 NW 2ND AVENUE
City-St-Zip: NORTH MIAMI, FL 33168

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: OSVALDO SOCA

PD

03/22/2007

Electronic Signature of Signing Officer or Director

Date