

2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Jul 11, 2005
Secretary of State**

DOCUMENT# N43147

Entity Name: IGLESIA CRISTIANOS UNIDOS INC.

Current Principal Place of Business:2255 W. FLAGLER
MIAMI, FL 33135 US**New Principal Place of Business:****Current Mailing Address:**P.O BOX 470534
MIAMI, FL 33247 US**New Mailing Address:**

FEI Number: 65-0281972 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:TORRES, ELTA P
2255 W. FLAGLER
MIAMI, FL 33135 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: DP () Delete
Name: TORRES, ELTA P.,
Address: 2255 W FLAGLER
City-St-Zip: MIAMI, FL 33155

Title: T () Delete
Name: PADILLA, MASSIEL
Address: 211 SW 18 AVE, APT 4
City-St-Zip: MIAMI, FL 33125

Title: SD () Delete
Name: GUARDADO, NORMA
Address: 225 SW 18 COURT APT # 4
City-St-Zip: MIAMI, FL 33135

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SD (X) Change () Addition
Name: TORRES, DAVID
Address: 2255 W FLAGLER ST
City-St-Zip: MIAMI, FL 33155

Title: VP,D () Change (X) Addition
Name: SANTIAGO, ASTRID M
Address: 2255 W FLAGLER ST
City-St-Zip: MIAMI, FL 33155

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ELTA P TORRES

P

07/11/2005

Electronic Signature of Signing Officer or Director

Date