

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Feb 12, 2004  
Secretary of State**

DOCUMENT# N45459

Entity Name: IGLESIA BIBLICA CRISTIANA DE HIALEAH GARDENS, INC.

**Current Principal Place of Business:**

6135 NW 167TH STREET  
E-9  
HIALEAH, FL 33015 US

**New Principal Place of Business:**

**Current Mailing Address:**

6135 NW 167TH STREET  
E-9  
HIALEAH, FL 33015 US

**New Mailing Address:**

FEI Number: 65-0312372      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

TARASIUK, MARIO D  
6954 BOTTLE BRUSH DRIVE  
HIALEAH, FL 33014 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: TARASIUK, MARIO D  
Address: 6954 BOTTLE BRUSH DRIVE  
City-St-Zip: MIAMI LAKES, FL 33014

Title: D ( ) Delete  
Name: ROSADO, JUAN  
Address: 8221 N.W. 200 TERRACE  
City-St-Zip: MIAMI, FL 33015

Title: D (X) Delete  
Name: ONTANEDA, CESAR  
Address: 3522 NW 95 TERR.AVE  
City-St-Zip: SUNRISE, FL 33351

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

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

Title: D ( ) Change (X) Addition  
Name: VILLEDA, ALVARO  
Address: 17440 NW 82 AVE  
City-St-Zip: HIALEAH, FL 33015

Title: D ( ) Change (X) Addition  
Name: SIU, CARLOS  
Address: 4033 PINE RIDGE LN.  
City-St-Zip: WESTON, FL 33331

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: MARIO D. TARASIUK

PD

02/12/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date