

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N47624

**FILED**  
**Jan 27, 2011**  
**Secretary of State**

**Entity Name:** IGLESIA METODISTA UNIDA NORTH HIALEAH, INC.

**Current Principal Place of Business:**

5559 PALM AVENUE  
HIALEAH, FL 33012

**New Principal Place of Business:**

**Current Mailing Address:**

5559 PALM AVENUE  
HIALEAH, FL 33012

**New Mailing Address:**

**FEI Number:** 65-0574870

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BOLUMEN, ILEANA DR  
5559 PALM AVE.  
HIALEAH, FL 33012 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  
Name: BOLUMEN, ILEANA DR  
Address: 12650 SW 33 ST  
City-St-Zip: MIRAMAR, FL 33027

Title: DS  
Name: FLORES, FRANCISCA E  
Address: 1675 W 65 ST  
City-St-Zip: HIALEAH, FL 33012

Title: TD  
Name: DELGADO, GRICELL  
Address: 2615 W 72 ST  
City-St-Zip: HIALEAH, FL 33016

Title: D  
Name: MORALES, RUTH D  
Address: 17621 NW 62 CT  
City-St-Zip: MIAMI, FL 33025

I hereby 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 all other like empowered.

SIGNATURE: ILEANA BOLUMEN

DRA

01/27/2011

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

\_\_\_\_\_  
Date