

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Aug 13, 2007
Secretary of State**

DOCUMENT# N48789

Entity Name: IGLESIA BAUTISTA DE "RENOVACION CRISTIANA", INC..

Current Principal Place of Business:

50 NW 51 PLACE
MIAMI, FL 33134 US

New Principal Place of Business:

Current Mailing Address:

50 NW 51 PLACE
MIAMI, FL 33134 US

New Mailing Address:

FEI Number: 65-0342568 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

RUIZ, ALDO E
6812 NW 113 CT
MIAMI, FL 33178 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: D () Delete
Name: RUIZ, HUGO,
Address: 11981 SW 34 TER
City-St-Zip: MIAMI, FL 33175

Title: D () Delete
Name: LOPEZ, HECTOR
Address: 8579 SW 5TH STREET
City-St-Zip: MIAMI, FL 33078

Title: D () Delete
Name: HEREDIA, RAYMUNDO,
Address: 1920 NW 34TH AVE
City-St-Zip: MIAMI, FL 33125

Title: D () Delete
Name: RUIZ, ALDO,
Address: 10908 N.W. 58 TERR
City-St-Zip: MIAMI, FL 33078

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 (X) Change () Addition
Name: RUIZ, ALDO,
Address: 6812 NW 113 CT
City-St-Zip: MIAMI, FL 33178

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: ALDO RUIZ

D

08/13/2007

Electronic Signature of Signing Officer or Director

_____ Date