2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Jul 14, 2008 DOCUMENT# N49618 Secretary of State

Entity Name: IGLESIA CRISTO LA UNICA ESPERANZA A.D. INC.

Current Principal Place of Business: New Principal Place of Business: 950 NW 66TH AVE MARGATE, FL 33063 US **Current Mailing Address: New Mailing Address:** 1254 N.W. 66TH AVENUE MARGATE, FL 330633410 FEI Number: 65-0341674 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MASTRIANNNI, EDIE 1531 SE HARMONY COURT US PORT ST. LUCIE, FL 34952 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete JONES, ROBERTO, Name: Name: 1254 NW 66TH AVE. Address: Address: City-St-Zip: MARGATE, FL 33063 City-St-Zip: Title: Title: () Delete () Change () Addition Name: ELSA, JONES Name: Address: 1254 NW 66TH AVE. Address: City-St-Zip: MARGATE, FL 33063 City-St-Zip: Title: () Delete Title: (X) Change () Addition PENAGOS, YOLIMA E RAMIREZ, RUTH Name: Name: 10138 TWIN LAKES DR Address: Address: **5744 NW 48TH DRIVE** City-St-Zip: CORAL SPRINGS, FL 33071 City-St-Zip: CORAL SPRINGS, FL 33067 Title: () Delete Title: (X) Change () Addition Name: RIERA, AYSA Name: RAMIREZ, GABRIELA 3540 BANKAS RD 1254 NW 66TH AVE Address: Address: City-St-Zip: MARGATE, FL 33063 City-St-Zip: MARGATE, FL 33063 Title: () Delete Title: () Change () Addition GARCIA, NERI N Name: Name: 7424 SW 10TH ST Address: Address: City-St-Zip: N. LAUDERDALE, FL 33068 City-St-Zip: Title: () Delete Title: () Change () Addition HERNANDEZ BURGOS, ESPERANZA Name: Name: Address: 6940 NW 14TH CT Address: MARGATE, FL 33063 City-St-Zip: City-St-Zip:

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: ROBERTO JONES Ρ 07/14/2008