

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49618

FILED
Jan 16, 2009
Secretary of State

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

Current Principal Place of Business:

950 NW 66TH AVE.
MARGATE, FL 33063 US

New Principal Place of Business:

Current Mailing Address:

1254 N.W. 66TH AVENUE
MARGATE, FL 330633410

New Mailing Address:

950 NW 66TH AVE.
MARGATE, FL 33063 US

FEI Number: 65-0341674

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MASTRIANNI, EDIE
1531 SE HARMONY COURT
PORT ST. LUCIE, FL 34952 US

Name and Address of New Registered Agent:

MASTRIANNI, EDIE
6834 NW GRANGER AVE.
PORT ST. LUCIE, FL 34983 US

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: EDIE MASTRIANNI

01/16/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: JONES, ROBERTO,
Address: 1254 NW 66TH AVE.
City-St-Zip: MARGATE, FL 33063

Title: V () Delete
Name: ELSA, JONES
Address: 1254 NW 66TH AVE.
City-St-Zip: MARGATE, FL 33063

Title: T () Delete
Name: RAMIREZ, RUTH
Address: 5744 NW 48TH DRIVE
City-St-Zip: CORAL SPRINGS, FL 33067

Title: S () Delete
Name: RAMIREZ, GABRIELA
Address: 1254 NW 66TH AVE
City-St-Zip: MARGATE, FL 33063

Title: D () Delete
Name: GARCIA, NERI N
Address: 7424 SW 10TH ST
City-St-Zip: N. LAUDERDALE, FL 33068

Title: D () Delete
Name: HERNANDEZ BURGOS, ESPERANZA
Address: 6940 NW 14TH CT
City-St-Zip: MARGATE, FL 33063

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V (X) Change () Addition
Name: JONES, ELSA
Address: 1254 NW 66TH AVE.
City-St-Zip: MARGATE, FL 33063

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: () Change () Addition
Name:
Address:
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

P

01/16/2009

Electronic Signature of Signing Officer or Director

Date