

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49618

FILED  
Apr 30, 2011  
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:**

950 NW 66TH AVE.  
MARGATE, FL 33063 US

**New Mailing Address:**

**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  
6834 NW GRANGER AVE.  
PORT ST. LUCIE, FL 34983 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: P  
Name: JONES, ROBERTO  
Address: 1254 NW 66TH AVE.  
City-St-Zip: MARGATE, FL 33063

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

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

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

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

Title: D  
Name: GUZMAN, FARIDA  
Address: 2381 RIVERSIDE DRIVE, APT. 302  
City-St-Zip: MARGATE, FL 33065

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: R. JONES

P

04/30/2011

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

\_\_\_\_\_ Date