

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
May 02, 2009
Secretary of State**

DOCUMENT# N50561

Entity Name: PENTECOSTAL CHURCH BIBICAL & MISSIONARY ASSOCIATION, INC.

Current Principal Place of Business:

140 NW 163 ST..
APT 4
NORTH MIAMI, FL 33169 US

New Principal Place of Business:

140 NW 163 ST..
APT 4
NORTH MIAMI, FL 33169 US

Current Mailing Address:

140 NW 163 ST..
APT 4
NORTH MIAMI, FL 33169 US

New Mailing Address:

FEI Number: 65-0356310 **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:

ROMAN, GILDA
140 N.W 163 ST.
APT 4
NORTH MIAMI, FL 33169 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 () Delete
Name: ROMAN, GILDA
Address: 140 NW 163 ST APT 4
City-St-Zip: NORTH MIAMI, FL 33169

Title: VD () Delete
Name: SANTANA, GEORGE A
Address: 605 NE 163 ST
City-St-Zip: N MIAMI BEACH, FL 33162

Title: TD () Delete
Name: PERDOMO, NERYS M
Address: 115 NW 202ND TERR, APT 113
City-St-Zip: MIAMI, FL 33169

Title: SD () Delete
Name: VENERNDA, PIERRE A
Address: 605 NE 163 ST.
City-St-Zip: N MIAMI BEACH, FL 33162

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: TD (X) Change () Addition
Name: ANYELIN, MUNDARAY
Address: 1501 NE 171 ST
City-St-Zip: NMB, FL 33162

Title: SD (X) Change () Addition
Name: YOJARY, MUNDARAY
Address: 1501 NE 171 ST
City-St-Zip: NMB, FL 33162

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: ROMAN GILDA

PD

05/02/2009

Electronic Signature of Signing Officer or Director

_____ Date