

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000002317

FILED
Mar 15, 2007
Secretary of State

Entity Name: COMUNIDAD SIERVOS DE CRISTO VIVO, INC.

Current Principal Place of Business:

3100 NW 77 CT
DORAL, FL 33122 US

New Principal Place of Business:

Current Mailing Address:

3100 NW 77 CT
DORAL, FL 33122 US

New Mailing Address:

FEI Number: 65-0413005

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PABLO, ALFREDO
10553 NW 51 ST
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: GATAMORTA, ZENAIDA
Address: 3360 SW 139 AVE
City-St-Zip: MIAMI, FL 33175

Title: D () Delete
Name: PABLO, ALFREDO
Address: 10553 N.W. 51 STREET
City-St-Zip: MIAMI, FL 33178

Title: D () Delete
Name: MARIA DEL PILAR MONT, ES DE OCA
Address: 8231 S.W. 14 STREET
City-St-Zip: MIAMI, FL 33144

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:

I hereby certify that the information supplied with this filing does not qualify for the 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: ALFREDO PABLO

D

03/15/2007

Electronic Signature of Signing Officer or Director

Date