2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 28, 2008 8:00 am
Secretary of State
03-28-2008 90036 038 ****70.00

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1. Entity Name
MARRANO SEPHARDIC JEWISH CHURCH, INC.

400033701

Principal Place of Business	Mailing Address
14474 SW 174 TERRA MIAMI, FL 33177 US	14474 SW 174 TERRA MIAMI, FL 33177 US

03102008 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 65-0436414 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CARLOS ALBERTO SILVA SANTISTEBAN 14474 SW 174 TERRACE MIAMI, FL 33177	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Carlos A Silva S. CARLOS SILVA SANTISTEBAN 03-26-08
(Required when changing registered agent, unless affiliated) (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD SILVA-SANTISTEBAN, CARLOS ALBERTO 14474 SW 174 TERRA SW MIAMI, FL 33177	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V REIMUNDO, ALVAREZ J 9540 SW 36 ST B MIAMI, FL 33165	☒ Delete	T FRANCOIS DE VAUX-DUMAS DE FOLETIER 14474 SW 174TERRA SW MIAMI FL. 33177	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T ALBERTO, SUARES 2712 NW 29 AVE MIAMI, FL 33186	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D TERGENS, ANDREA 6135 SW 129 PL MIAMI, FL 33183	☒ Delete	T JERGENS, ANDREA 14474 SW 174 TERRAS MIAMI, FL, 33177	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S CARDENAS, ZELNIRA 14474 SW 174 TERR MIAMI, FL 33177	☒ Delete	S CARDENAS, ZELMIRA 14474 SW 174 TERRAS MIAMI FL 33177	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Carlos A Silva S. Carlos Alberto Silva Santisteban 03-26-08. 786-387-6600
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #