2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2009
Secretary of State

DOCUMENT# N93000005423

Entity Name: IGLESIA BAUTISTA VICTORIA EN CRISTO INC.

Current Principal Place of Business:

405 WEST 28 ST
MIAMI BEACH, FL 33140 US

New Principal Place of Business:

Current Mailing Address:

13937 SW 44 LANE CR.
MIAMI, FL 33175

New Mailing Address:

FEI Number: 65-0464094 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PALACIOS, VICTOR M
13937 SW 44TH LN
CR #B
MIAMI, FL 33175 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: PALACIOS, VICTOR M.
Address: 13937 SW 44TH LANE, CIR. B
City-St-Zip: MIAMI, FL 33175

Title: T ( ) Delete
Name: JOSE, AQUINO
Address: 405 WEST 28 STREET
City-St-Zip: MIAMI BEACH, FL 33140

Title: D ( ) Delete
Name: PALACIOS, MARTHA G.
Address: 13937 SW 44TH LANE, CIR. B
City-St-Zip: MIAMI, FL 33175

Title: T ( ) Delete
Name: BOZO, ROSA
Address: 15338 SW 72 ST #13
City-St-Zip: MIAMI, FL 33193

Title: T ( ) Delete
Name: PALACIOS, VICTORIA
Address: 13937 SW 44 LN.CR. B
City-St-Zip: MIAMI, FL 33175

Title: T ( ) Delete
Name: NICOLINI, ROSA
Address: 533 COLLINS AVE # 307
City-St-Zip: MIAMI BEACH, FL 33139

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:

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: MARTHA G. PALACIOS D 04/14/2009

Electronic Signature of Signing Officer or Director — Date