2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N94000000423

FILED Jun 29, 2006 Secretary of State

Entity Name: MISION BAUTISTA HISPANA INC.

Current Principal Place of Business: New Principal Place of Business:

4161 WEST HILLSBORO BLVD 4161 WEST HILLSBORO BLVD COCONUT CREEK, FL 33073 COCONUT CREEK, FL 33073 US

Current Mailing Address: New Mailing Address:

2983 NW 92 AVE 4161 WEST HILLSBORO BLVD CORAL SPRINGS, FL 33065 COCONUT CREEK, FL 33073 US

FEI Number: 65-0912216 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

VIDAL, CAROL 2983 NW 92 AVE CORAL SPRINGS, FL 33065 US

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:

Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

VIDAL, CAROL VIDAL, CAROL Name: Name: 2983 NW 92 AVE Address: 2983 NW 92 AVE Address:

City-St-Zip: CORAL SPRINGS, FL 33065 City-St-Zip: CORAL SPRINGS, FL 33065 US

Title: Title: (X) Change () Addition () Delete GELABERT, MARY Name: BRISTER, LARRY Name:

Address: 8112 NW 75 AVE Address: 611 LAKEVIEW DR. City-St-Zip: TAMARAC, FL 33321 City-St-Zip: CORAL SPRIGS, FL 33071 US

Title: () Delete Title: (X) Change () Addition

CHIN QUEE, CELIA MALDONADO, ENRIQUE Name: Name: Address: 8112 NW 75 AVE Address: 10645 NW 6TH STREET City-St-Zip: TAMARAC, FL 33321 City-St-Zip: CORAL SPRINGS, FL 33065 US

Title: (X) Delete Title: () Change () Addition

Name: ALONSO, JAIRO Name: Address: **3841 NW 43 TERRACE** Address: City-St-Zip: COCONUT CREEK, FL 33073 City-St-Zip:

Title: (X) Delete Title: () Change () Addition

PINEDO, MAXIMILIANO Name: Name: 3100 RIVERSIDE DRIVE AP. 205 Address: Address: City-St-Zip: CORAL SPRINGS, FL 33065 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: CAROL VIDAL Ρ 06/29/2006