

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 07, 2004  
Secretary of State**

DOCUMENT# N94000000666

Entity Name: HOUSE OF FAITH CHURCH, INC.

**Current Principal Place of Business:**

850 IVES DAIRY RD  
T-6-8  
MIAMI, FL 33179 US

**New Principal Place of Business:**

**Current Mailing Address:**

1245 DOVE AVENUE  
MIAMI SPRINGS, FL 33166 US

**New Mailing Address:**

FEI Number: 65-0468990      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

VELAZQUEZ, JOSE GUILLERMO  
1245 DOVE AVENUE  
MIAMI SPRINGS, FL 33166 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: VELAZQUEZ, JOSE GUILLERMO  
Address: 1245 DOVE AVENUE  
City-St-Zip: MIAMI SPRINGS, FL 33166

Title: VDT ( ) Delete  
Name: VELAZQUEZ, SARITA R  
Address: 1245 DOVE AVENUE  
City-St-Zip: MIAMI SPRINGS, FL 33166

Title: S ( ) Delete  
Name: MELENDEZ, MIRNALIZ  
Address: 1410 N E 132ND ROAD  
City-St-Zip: NORTH MIAMI, FL 33161

Title: D ( ) Delete  
Name: BANOS, FEDERICO L  
Address: 13105 NE 13TH AVE  
City-St-Zip: NORTH MIAMI, FL

Title: D ( ) Delete  
Name: GONZALEZ, MIGUEL A  
Address: 7711 NW 5TH STREET  
City-St-Zip: PEMBROKE PINES, FL 33009

**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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JOSE GUILLERMO VELAZQUEZ

PD

04/07/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date