

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000002303

FILED
Jan 10, 2007
Secretary of State

Entity Name: IGLESIA CENTRO DE FE, INC.

Current Principal Place of Business:

29800 SW 153 CT
LEISURE CITY, FL 33033

New Principal Place of Business:

Current Mailing Address:

29800 SW 153 CT
LEISURE CITY, FL 33033

New Mailing Address:

FEI Number: 65-0562067

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TORRES, FRANCISCO
15623 SW 297 TERRACE
LEISURE CITY, FL 33033 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: TORRES, FRANCISCO
Address: 15623 SW 297TH TERRACE
City-St-Zip: LEISURE CITY, FL 33033

Title: SD () Delete
Name: PEREZ, JUANA L
Address: 15200 SW 184 STREET
City-St-Zip: MIAMI, FL 33187

Title: TD () Delete
Name: PEREZ, JOSE S
Address: 15200 SW 184 STREE
City-St-Zip: MIAMI, FL 33187

Title: D () Delete
Name: TABILO, CESAR
Address: 20201 SW FRANSA ROAD
City-St-Zip: MIAMI, FL 33089

Title: D () Delete
Name: EUCEDA, JOSE C
Address: 14535 SW 297 TERR
City-St-Zip: LEIMUE CITY, FL 33033

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: PEREZ, JOSE S
Address: 15200 SW 184 STREET
City-St-Zip: MIAMI, FL 33187

Title: D (X) Change () Addition
Name: TABILO, CESAR
Address: 20201 SW FRANJO ROAD
City-St-Zip: MIAMI, FL 33089

Title: D (X) Change () Addition
Name: EUCEDA, JOSE C
Address: 14535 SW 297 TERR
City-St-Zip: LEISURE CITY, FL 33033

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: FRANCISCO TORRES

PD

01/10/2007

Electronic Signature of Signing Officer or Director

Date