2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9400003103

FILED Apr 04, 2007 Secretary of State

Entity Name: IGLESIA CRISTIANA CASA DE MISERICORDIA, INC.

	rincipal Place		New Principal Plac	
395 SW	130 ST			
7-108 AMI, FL	33186 US			
rrent M	ailing Addres	s:	New Mailing Addre	ess:
395 SW	130 ST			
7-108 AMI, FL	33186 US			
	: 65-0500119	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
me and	Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:
), MARIO DANII 172ND TERRA 33157 US			
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	named entity s e of Florida.	ubmits this statement for the p	ourpose of changing its register	red office or registered agent, or both,
he State	e of Florida.	ubmits this statement for the p	ourpose of changing its register	red office or registered agent, or both,
he State	e of Florida. RE:	ubmits this statement for the position in the position in the position is statement for the position in the position in the position is statement for the position in the position in the position is statement for the position in the position in the position is statement for the position in the position in the position is statement for the position in the position i		red office or registered agent, or both, Date
the State	e of Florida. RE:	ic Signature of Registered Age	ent	
he State	e of Florida. RE: Electroni S AND DIRECT	ic Signature of Registered Age FORS: Delete IO D TERR	ent	Date
he State NATUF FICERS : : : : : : : : : : : : : : : : : :	e of Florida. RE: Electroni S AND DIRECT PD () ESTRADA, MAR 11515 SW 172 MIAMI, FL 3315	ic Signature of Registered Age FORS: Delete 10 D 15ERR 157 Delete 1RADO	ent ADDITIONS/CHANG Title: Name: Address:	Date GES TO OFFICERS AND DIRECTO
ne State NATUF FICERS : ne: ress: -St-Zip: : ne: ress:	E of Florida. RE: Electroni S AND DIRECT PD () ESTRADA, MAR 11515 SW 1727 MIAMI, FL 3315 VPD () MOLLEDA, CON 5800 SW 90 CT MIAMI, FL 3317	ic Signature of Registered Age FORS: Delete IO D TERR 57 Delete IRADO 73 Delete SEPH A AVE	ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address:	Date GES TO OFFICERS AND DIRECTO () Change () Addition

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: JOSEPH A. DEJESUS SD 04/04/2007