


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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| DOCUMENT # N950000Q1727 | |  |
| 1. Entity Name IGLESIA CRISTIANA VERBO DE MIAMI, INC. | | |

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|---|--|
| Principal Place of Business 7330 NW 8 ST MIAMI, FL 33126 US | Mailing Address P.O. BOX 520824 MIAMI, FL 33152-0824 |
|---|--|

DO NOT WRITE IN THIS SPACE

8. Name and Address of Current Registered Agent

INTRASTATE REGISTERED AGENT CORPORATION
1916 SOUTH CENTRAL AVENUE
LAKELAND, FL 33803

DO NOT WRITE
IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

| | |
|---|------------|
| SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)</small> | DATE _____ |
|---|------------|

Filing Fee is \$61.25
Due by September 14, 2007

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be**
Added to Fees

| 10. OFFICERS AND DIRECTORS | |
|---|---|
| TITLE NAME STREET ADDRESS CITY-ST- ZIP | PD DE LA GUARDIA, JOSE 7330 NW 8 ST MIAMI, FL 33126 |
| TITLE NAME STREET ADDRESS CITY-ST- ZIP | TD DE LA PENA, WILFREDO 7330 NW 8 ST MIAMI, FL 33126 |
| TITLE NAME STREET ADDRESS CITY-ST- ZIP | SD MORALES, CARLOS 7330 N.W. 8 ST. MIAMI, FL 33126 |
| TITLE NAME STREET ADDRESS CITY-ST- ZIP | VPD DE LA GUARDIA, CESAR 9405 FONTAINEBLEAU BLVD., APT 205 MIAMI, FL 33172 |
| TITLE NAME STREET ADDRESS CITY-ST- ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST- ZIP | <i>B 6/27/07</i> |

DO NOT WRITE
IN THIS SPACE


600104008716
04/02/07--01037--002 **60.00

600104008716
07/03/07--01023--028 **10.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

| | |
|---|-------------------------------------|
| SIGNATURE: <i>Jose De la Guardia</i> | 5.23.07 305 |
| <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> | <small>Date Daytime Phone #</small> |

FILED
07 JUN 25 AM 9:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
04-02-07-00537-002 \$60.00



05232007 No Chg-NP CR2E037 (4/06)

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|--|-------------------------------|
| 4. FEI Number 65-0573852 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required | |