2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2009
Secretary of State

DOCUMENT# N95000004136

Entity Name: CENTRO DE ADORACION BET-EL, INC.

Current Principal Place of Business:

505 N. VALRICO ROAD
VALRICO, FL 33594 US

New Principal Place of Business:

Current Mailing Address:

505 N. VALRICO ROAD
VALRICO, FL 33594 US

New Mailing Address:

FEI Number: 59-3331054 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

VELASQUEZ, JOEL A
505 N. VALRICO ROAD
VALRICO, FL 33594 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:	P	( ) Delete
Name:	VALASQUEZ, JOSE	
Address:	530 TUSCANNY STREET	
City-St-Zip:	BRANDON, FL 33511	
Title:	S	( ) Delete
Name:	MOSQUERA, DORA	
Address:	511 VINTAGE WAY	
City-St-Zip:	BRANDON, FL 33511	
Title:	V	( ) Delete
Name:	VELASQUEZ, JOSEFA E.	
Address:	530 TUSCANNY STREET	
City-St-Zip:	BRANDON, FL 33511	
Title:	D	( ) Delete
Name:	MOSQUERA, GONZALO	
Address:	511 VINTAGE WAY	
City-St-Zip:	BRANDON, FL 33511	
Title:	T	( ) Delete
Name:	VELASQUEZ, JOEL A	
Address:	530 TUSCANNY STREET	
City-St-Zip:	BRANDON, FL 33511	
Title:	D	( ) Delete
Name:	PADILLA, WAGNER	
Address:	2526 WHEELER GROVES	
City-St-Zip:	SEFFNER, FL 33584	

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

I hereby certify that the information supplied with this filing does not qualify 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: JOSE VELASQUEZ P 05/01/2009
Electronic Signature of Signing Officer or Director — Date