

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005349

FILED  
Apr 20, 2005  
Secretary of State

**Entity Name:** IGLESIA BAUTISTA INTERNACIONAL DE KISSIMMEE INC.

**Current Principal Place of Business:**

1990 NEPTUNE ROAD  
KISSIMMEE, FL 34744

**New Principal Place of Business:**

**Current Mailing Address:**

1990 NEPTUNE ROAD  
KISSIMMEE, FL 34744

**New Mailing Address:**

**FEI Number:** 59-3452227

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RODRIGUEZ, MARIA A  
3380 FERN DR  
KISSIMMEE, FL 34746 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: BINET, JUAN J  
Address: 303 BLUE BAYOU DRIVE  
City-St-Zip: KISSIMMEE, FL 34743

Title: T ( ) Delete  
Name: PEREZ, EDWIN  
Address: 2260 BRONCO DRIVE  
City-St-Zip: ST CLOUD, FL 34771

Title: D ( ) Delete  
Name: VARGAS, MANUEL  
Address: 509 MISSOURI AVENUE  
City-St-Zip: ST CLOUD, FL 34769

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: BINET, JUAN J  
Address: 2202 JESSICA LN  
City-St-Zip: KISSIMMEE, FL 34744

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: JUAN J. BINET

P

04/20/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date