2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 08, 2010
Secretary of State

DOCUMENT# N96000001286

Entity Name: IGLESIA NUEVO AVIVAMIENTO PENTECOSTES, INC.

Current Principal Place of Business:

14725SW 302 STREET
LEISURE CITY, FL 33033

New Principal Place of Business:

Current Mailing Address:

14725SW302ST
LIESURE CITY, FL 33033

New Mailing Address:

FEI Number: 65-0687524 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

RAMOS, JUAN R
14725 SW302 ST
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
Name: RAMOS, JUAN R
Address: 14725 SW 302 TER
City-St-Zip: LIESURE CITY, FL 33033

Title: VD
Name: RAMOS, ELIZABETH
Address: 14725 SW 302 ST
City-St-Zip: LEISURE CITY, FL 33033

Title: D
Name: PANTALEON, BONIFACIO
Address: 17360 SW 232 ST. LOT #65
City-St-Zip: MIAMI, FL 33170

Title: S
Name: IRENE, GARCIA
Address: 25512 SW 129 CT
City-St-Zip: PRINCETON, FL 33032

Title: T
Name: FRANSISCO, BATZ
Address: 28501 SW 152 AVE LOT# 198
City-St-Zip: LEISURE CITY, FL 33033

Title: T
Name: GRACIELA, GARCIA
Address: 25301 SW 129 CT
City-St-Zip: PRINCETON, FL 33032

I hereby 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 all other like empowered.

SIGNATURE: JUAN R RAMOS PD 03/08/2010

Electronic Signature of Signing Officer or Director — Date