

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002790

FILED  
Mar 18, 2009  
Secretary of State

**Entity Name:** IGLESIA CRISTIANA MINISTERIAL DE RESTAURACION "JESUCRISTO REINA", INC.

**Current Principal Place of Business:**

1620 PREMIER ROW  
ORLANDO, FL 32809

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 770682  
ORLANDO, FL 32877 US

**New Mailing Address:**

**FEI Number:** 59-3347807

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ESCOBAR-MARCANO, JANNET  
1658 TATTENHAM WAY  
ORLANDO, FL 32837 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: SD ( ) Delete  
Name: COTTO, WANDA  
Address: 2163 MOUNTLEIGH TR  
City-St-Zip: ORLANDO, FL 32824 US

Title: TD ( ) Delete  
Name: ESCOBAR, MARIELLA  
Address: 1242 WELSON RD.  
City-St-Zip: ORLANDO, FL 32837 US

Title: D ( ) Delete  
Name: MARTE, BELEN  
Address: 2179 CHATHAM PLACE DR  
City-St-Zip: ORLANDO, FL 32824 US

Title: PD ( ) Delete  
Name: ESCOBAR, JANNET  
Address: 1658 TATTENHAM WAY  
City-St-Zip: ORLANDO, FL 32837 US

**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:

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: JANNET ESCOBAR

PD

03/18/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date