2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002892

FILED Apr 15, 2009 Secretary of State

Entity Name: IGLESIA CONGREGACIONAL DE DIOS PENTECOSTAL, INC.

Current Principal Place of Business: New Principal Place of Business:

235 NW 35TH ST MIAMI, FL 33127

Current Mailing Address: New Mailing Address:

235 NW 35TH ST MIAMI, FL 33127

FEI Number: 65-0683235 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

REYES, ROSA

235 NW 35TH ST

MIAMI, FL 33127 US

UMANA, ROSA M PASTOR
235 NW 35TH ST

MIAMI, FL 33127 US

MIAMI, FL 33127 US

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: ROSA MARIA UMANA 04/15/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: P () Delete Title: P (X) Change () Addition

 Name:
 REYES, ROSA
 Name:
 UMANA, ROSA M

 Address:
 235 NW 35TH ST
 Address:
 235 NW 35TH ST

 City-St-Zip:
 MIAMI, FL 33127
 City-St-Zip:
 MIAMI, FL 33127

Title: VP () Delete Title: VP (X) Change () Addition Name: UMANA, ANA Name: UMANA, ROBERTO

 Name:
 UMANA, ANA
 Name:
 UMANA, ROBERT

 Address:
 235 NW 35TH ST
 Address:
 235 NW 35TH ST

 City-St-Zip:
 MIAMI, FL 33127
 City-St-Zip:
 MIAMI, FL 33127

Title: () Delete Title: SEC () Change (X) Addition

 Name:
 Name:
 UMANA, ANA S

 Address:
 Address:
 270 NW 107 AVE. APT.202

 City-St-Zip:
 City-St-Zip:
 MIAMI, FL 33172

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: ROSA MARIA UMANA P 04/15/2009