

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005424

FILED  
Jan 21, 2007  
Secretary of State

Entity Name: IGLESIA BAUTISTA SILVER PALM, INC.

**Current Principal Place of Business:**

13155 S.W. 232 STREET  
GOULDS, FL 33172 US

**New Principal Place of Business:**

**Current Mailing Address:**

13155 SW 232 STREET  
GOULDS, FL 33172

**New Mailing Address:**

FEI Number: 65-0719746

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DUMAS, GEOSVANYS  
19752 SW 132ND PLACE  
MIAMI, FL 33177 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 ( ) Delete  
Name: DUMAS, GEOSVANYS  
Address: 19752 SW 132ND PLACE  
City-St-Zip: MIAMI, FL 33177

Title: VD ( ) Delete  
Name: BORRERO, VICTOR R  
Address: 20131 SW 128 CT  
City-St-Zip: MIAMI, FL 33177

Title: D ( ) Delete  
Name: MACCARRONE, GUSTAVO A  
Address: 12260 SW 187TH TERRACE  
City-St-Zip: MIAMI, FL 331770923

Title: D ( ) Delete  
Name: CRUZ, JESUS  
Address: 14820 NARANJA LAKES BLVD., 2Q  
City-St-Zip: MIAMI, FL 33032

Title: D ( ) Delete  
Name: POUSA, RICARDO  
Address: 12436 SW 203 TERRACE  
City-St-Zip: MIAMI, FL 33177

**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: D (X) Change ( ) Addition  
Name: CARLOS, ARMENTEROS M  
Address: 20233 SW 128TH PL  
City-St-Zip: MIAMI, FL 33177

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 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: GEOSVANYS DUMAS

PD

01/21/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date