

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000001330

FILED
Feb 05, 2004
Secretary of State**Entity Name:** ASAMBLEA DE DIOS RESTAURACION, INC.**Current Principal Place of Business:**3802 W. 12 AVE
HIALEAH, FL 33012**New Principal Place of Business:****Current Mailing Address:**3806 W. 12 AVE
HIALEAH, FL 33012**New Mailing Address:****FEI Number:** 65-0734698**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ALMEIDA, ELIAS
15855 MIAMI LAKEWAY N. APT. 348
HIALEAH, FL 33014 US**Name and Address of New Registered Agent:**CHEVEREZ, ANTHONY
2621 AZALEA
MIRAMAR, FL 33025 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: CHEVEREZ ANTHONY

02/05/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ALMEIDA, ELIAS
Address: 15610 BULL RUN RD, #609
City-St-Zip: MIAMI LAKES, FL 33014

Title: VD () Delete
Name: MENDES ALMEIDA, VALERIA
Address: 15610 BULL RUN RD, #609
City-St-Zip: MIAMI LAKES, FL 33014

Title: SD () Delete
Name: DEL SOCORRO LOPEZ, IVANIA
Address: 10600 SW 204 TERRACE
City-St-Zip: MIAMI, FL 33189

Title: TD () Delete
Name: GONZALEZ, ALFONSO
Address: 2699 W. 12TH AVE #7
City-St-Zip: HIALEAH, FL 33012

Title: D (X) Delete
Name: GIL, HIGINIO
Address: 18145 NW 84TH AVE
City-St-Zip: HIALEAH, FL 33012

Title: D (X) Delete
Name: CASTRO, HAGLY
Address: 3699 W. 12TH AVE #12
City-St-Zip: HIALEAH, FL 33012

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CHEVEREZ, ANTHONY
Address: 2621 AZALEA AVENUE
City-St-Zip: MIRAMAR, FL 33025

Title: VP (X) Change () Addition
Name: RAMIREZ, BERNICE
Address: 2621 AZALEA AVENUE
City-St-Zip: MIRAMAR, FL 33025

Title: SC (X) Change () Addition
Name: GIL, ANN M
Address: 221 NW 132 CT
City-St-Zip: MIAMI, FL 33182

Title: TRES (X) Change () Addition
Name: D'CASTRO, MAGALY
Address: 3699 WEST 12TH AVENUE
City-St-Zip: HIALEAH, FL 33012

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: CHEVERZ ANTHONY

P

02/05/2004

Electronic Signature of Signing Officer or Director

Date