

2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

APPROVED
AND
FILED

06 DEC -6 PM 3:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

WSE

DOCUMENT # N97000002909

1. Entity Name
IGLESIA EL SENOR ES MI ROCA, INC.



Principal Place of Business
400 NW 128 STREET
NORTH MIAMI, FL 33168

Mailing Address
400 NW 128 STREET
NORTH MIAMI, FL 33168



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

11202006 Chg-NP CR2E037 (4/06)

City & State

City & State

4. FEI Number
65-0756533

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DELIZ, JORGE
400 NW 128 STREET
NORTH MIAMI, FL 33168

7. Name and Address of New Registered Agent

Name
DORIS DELIZ
Street Address (P.O. Box Number is Not Acceptable)
400 NW 128 Street

City MIAMI FL Zip Code 33168

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Doris Deliz*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

11-20-06

DATE

Amended AR is \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☒ Delete
NAME DELIZ, JORGE
STREET ADDRESS 400 NW 128 STREET
CITY-ST-ZIP NORTH MIAMI, FL 33168

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 800082329128
CITY-ST-ZIP 12/06/06--01059--017 **\$61.25

TITLE DT ☐ Delete
NAME PEREZ, MARYSABEL
STREET ADDRESS 1465 NE 121ST STREET #B505
CITY-ST-ZIP NORTH MIAMI, FL 33167

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME DELIZ, DORIS
STREET ADDRESS 400 NW 128TH STREET
CITY-ST-ZIP MIAMI, FL 33168

TITLE DP ☒ Change ☐ Addition
NAME Deliz, Doris
STREET ADDRESS 400 NW 128 Street
CITY-ST-ZIP Miami, FL 33168

TITLE DS ☐ Delete
NAME RIVERA, CLAUDIA L
STREET ADDRESS 3900 GARDEN AVENUE
CITY-ST-ZIP MIAMI BEACH, FL 33140

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Doris Deliz*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11-20-06

Date

Daytime Phone #

(786) 235-1895