2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000002909

RIVERA, CLAUDIA L

3900 GARDEN AVENUE

MIAMI BEACH, FL 33140 US

Name:

Address:

City-St-Zip:

FILED Apr 30, 2007 Secretary of State

Entity Nan	ne: IGLESIA	A EL S	SENOR ES MI ROC	CA, INC.				
Current Principal Place of Business:					New Principal Place of Business:			
400 NW 12 NORTH MI	8 STREET AMI, FL 331	68	US					
Current Mailing Address:					New Mailing Address:			
400 NW 12 NORTH MI	8 STREET AMI, FL 331	68	US					
FEI Number:	65-0756533	FI	El Number Applied Fo	r() FEI Nu	mber Not Appl	icable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:					Name and Address of New Registered Agent:			
DELIZ, DOI 400 NW 12 MIAMI, FL	8 STREET	8						
The above in the State	named entit of Florida.	y subr	mits this statement	for the purpose o	of changing i	ts registere	ed office or registered agent, or both,	
SIGNATUR								
	Electro	onic S	ignature of Registe	ered Agent			Date	
OFFICERS AND DIRECTORS:					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PD (DELIZ, DORI 400 NW 128 MIAMI, FL 33	STREE	:T		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	DT (PEREZ, MAR 1465 NE 121 NORTH MIAN	ST STF	EL REET #B505		Title: Name: Address: City-St-Zip:	100 NW 16	(X) Change()Addition MARYSABEL 3RD STREET AMI, FL 33169 US	
Title:	DS (() Dele	ete		Title:	D	(X) Change () Addition	

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.

Name:

Address:

City-St-Zip:

BERNIER, CARMEN L

429 NW 3RD STREET

MIAMI, FL 33127 US

SIGNATURE: DORIS DELIZ PD 04/30/2007