2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
May 19, 2008
Secretary of State

DOCUMENT# N97000002909

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

Current Principal Place of Business:

400 NW 128 STREET
NORTH MIAMI, FL 33168 US

New Principal Place of Business:

Current Mailing Address:

400 NW 128 STREET
NORTH MIAMI, FL 33168 US

New Mailing Address:

FEI Number: 65-0756533 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DELIZ, DORIS
400 NW 128 STREET
MIAMI, FL 33168 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: DELIZ, DORIS
Address: 400 NW 128 STREET
City-St-Zip: MIAMI, FL 33168 US

Title: DT ( ) Delete
Name: CHAMORRO, MARTHA
Address: 1801 NE 140 STREET, APT 206
City-St-Zip: NORTH MIAMI, FL 33181 US

Title: D ( ) Delete
Name: BERNIER, CARMEN L
Address: 429 NW 43RD STREET
City-St-Zip: MIAMI, FL 33127 US

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change ( ) Addition
Name: DELIZ, DORIS
Address: 400 NW 128 STREET
City-St-Zip: MIAMI, FL 33168 US

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: DP ( ) Change (X) Addition
Name: DELIZ, JORGE
Address: 400 NW 128 STREET
City-St-Zip: NORTH MIAMI, FL 33168 US

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: DORIS DELIZ D 05/19/2008

Electronic Signature of Signing Officer or Director — Date