

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004841

FILED
Apr 16, 2009
Secretary of State

Entity Name: IGLESIA BAUTISTA LIBRE ENCUENTRO CON DIOS, INC.

Current Principal Place of Business:

9849 SW 40 ST
MIAMI, FL 33165 US

New Principal Place of Business:

Current Mailing Address:

19423 SW 114 PLACE
MIAMI, FL 33157

New Mailing Address:

FEI Number: 65-0820443

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALFARO, OMAR
19423 SW 114 PLACE
MIAMI, FL 33157 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: AIFARO, OMAR
Address: 19423 SW 114TH PL
City-St-Zip: MIAMI, FL 33157

Title: SD () Delete
Name: CARRERAS, MAGDIALYS
Address: 3800 SW 102ND AVE, #121
City-St-Zip: MIAMI, FL 33165

Title: TD () Delete
Name: DELGADO, ANTONIO
Address: 18971 SW 32ND STREET
City-St-Zip: MIRAMAR, FL 33029

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:

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: OMAR ALFARO

PD

04/16/2009

Electronic Signature of Signing Officer or Director

Date