2004 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

Aug 09, 2004 8:00 am Secretary of State **DOCUMENT # N97000005750** 03-22-2004 90061 004 ****70.00 IGLESIA PENTECOSTAL UNIDA TABERNACULO DE VIDA, INC. Principal Place of Business Mailing Address 460 W. 29 ST. 13149 SW 11TH LANE CIR HIALEAH, FL 33012 MIAMI, FL 33184 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc Suite, Apt. #, etc. CR2E037 (10/03) Chg-NP 07212004 City & State Applied For City & State 4. FEI Number 65-0788031 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Jorge A. Valle VALLE, JR, JORGE A Street Address (P.O. Box Number is Not Acceptable) 10225 SW 24 ST. B 122 13449 SW CIT MIAMI, FL 33165 1(th Lane Zip Code 33184 MiaMi 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 registe 7/23/04 SIGNATURE . ent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be - Trust Fund Contribution. Florida Department of State Due by September 8, 2004 ... Added to Fees, ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. TITLE TITLE ☐ Change noitibba 🔲 Delete NAME VALLE, JORGE A NAME **13149 SW 11TH LANE CIR** STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI, FL 33184 VD **☑** Delete Change ☐ Addition TITLE TITLE Gonzalez Roberto A VALLE, JR. JORGE A NAME NAME 2001 SW 13 AVE STREET ADDRESS 13149 SW 11TH LANE CIR STREET ADDRESS Miami, FL 33145 MIAMI, FL 33184 CITY-ST-ZIP CITY-ST-ZIP **Change** Addition Delete TITLE Baltoda No Leopoldo GONZALEZ, ROBERTO A NAME NAME 1/357 Sw 1 ST # 302 2001 SW 13 AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33129 TITLE ☐ Change Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-7P ☐ Addition · Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition Change THE ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receive on 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 han address, with all other like empowered. changed, or on an attachment

SIGNATURE:

7/23/04

305 207-8511

Daytime Phone #

FILED