

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006728

FILED
Apr 19, 2007
Secretary of State

Entity Name: IGLESIA PENTECOSTAL HOSANNA, INC.

Current Principal Place of Business:

900 NW 30TH. STREET
MIAMI, FL 33127

New Principal Place of Business:

Current Mailing Address:

626 NW 47TH. STREET
MIAMI, FL 33127

New Mailing Address:

FEI Number: 65-0987253

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LUIS, SANTANA REV.
626 NW 47TH. STREET
MIAMI, FL 33127 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: PPD () Delete
Name: SANTANA, LUIS REV.
Address: 626 NW 47TH. STREET
City-St-Zip: MIAMI, FL 33127

Title: SD () Delete
Name: NOLASCO, ADELAIDA
Address: 626 NW 47TH. STREET
City-St-Zip: MIAMI, FL 33127

Title: TD () Delete
Name: GOMEZ, BENITA
Address: 6606 NW 2ND COURT
City-St-Zip: MIAMI, FL 33150

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 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: LUIS SANTANA

PPD

04/19/2007

Electronic Signature of Signing Officer or Director

Date