## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N98000000787

FILED Mar 24, 2005 Secretary of State

Entity Name: IGLESIA DE DIOS RESTAURACION, INC. **Current Principal Place of Business: New Principal Place of Business:** 997 S W 34TH TERRACE PALM CITY, FL 34990 **Current Mailing Address: New Mailing Address:** 997 S W 34TH TERRACE PALM CITY, FL 34990 FEI Number: 65-0828400 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BARRERA, CESAR E 997 S W 34TH TERRACE PALM CITY, FL 34990 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change ( ) Addition () Delete BARRERA, CESAR E BARRERA, CESAR E Name: Name: 1189 S.W. 31ST STREET Address: 997 SW 34 TERR Address: City-St-Zip: PALM CITY, FL 34990 City-St-Zip: PALM CITY, FL 34990 Title: ( ) Delete Title: (X) Change ( ) Addition Name: BARRERA, OLGA Name: SARAT, DIEGO Address: 997 SW 34TH TERRACE Address: 3263 SE OUAR ST City-St-Zip: PALM CITY, FL 34990 City-St-Zip: PORT ST LUCIE, FL 34984 Title: () Delete Title: () Change () Addition OSORIO, JOSE L Name: Name: Address: 2891 SE CLAYTON ST Address: City-St-Zip: STUART, FL 34997 City-St-Zip: Title: () Delete Title: TR ( ) Change (X) Addition Name: Name: TAHAY, DIEGO V Address: Address: 1658 SE 10TH ST. City-St-Zip: City-St-Zip: STUART, FL 34996

I hereby certify that the information supplied with this filing does not qualify for the 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 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: CESAR BARRERA P 03/24/2005