

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000005495

FILED
Jan 05, 2009
Secretary of State

Entity Name: IGLESIA PENTECOSTAL FUENTE DE VIDA, C.L.A. INC.

Current Principal Place of Business:

5840 WASHINGTON ST.
HOLLYWOOD, FL 33020

New Principal Place of Business:

Current Mailing Address:

5840 WASHINGTON ST.
HOLLYWOOD, FL 33020

New Mailing Address:

FEI Number: 65-0662954

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOTO, HECTOR L
940 N. 66 AVE.
HOLLYWOOD, FL 33024 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: P () Delete
Name: SOTO, HECTOR L REV
Address: 940 N. 66TH AVE.
City-St-Zip: HOLLYWOOD, FL 33024

Title: T () Delete
Name: ROSARIO, EMMA
Address: 553 NW 93 STREET
City-St-Zip: MIAMI, FL 33150

Title: ST () Delete
Name: ROSARIO, EMMA
Address: 553 N.W. 93 ST.
City-St-Zip: MIAMI, FL 33150

Title: S () Delete
Name: NEGRON, ROSA
Address: 4409 S.W. 66 TER.
City-St-Zip: DAVIE, FL 33314

Title: V (X) Delete
Name: CRUZ, FELIX
Address: 7500 HAYES STREET
City-St-Zip: HOLLYWOOD, FL 33024

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change () Addition
Name: NEGRON, ROSA
Address: 134 PALM AVE
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: V (X) Change () Addition
Name: GONZALEZ, ADRIAN
Address: 6441 CHARLESTON ST
City-St-Zip: HOLLYWOOD, FL 33024

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: HECTOR L SOTO

P

01/05/2009

Electronic Signature of Signing Officer or Director

Date