

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001951

**FILED
Apr 26, 2004
Secretary of State**

Entity Name: ETERNAL WORD OF LIFE OF THE ASSEMBLIES OF GOD, INC.

Current Principal Place of Business:

1234 W 31ST
HIALEAH, FL 33012

New Principal Place of Business:

1800 W 68TH ST.
SUITE 139
HIALEAH, FL 33014 US

Current Mailing Address:

1234 W 31ST
HIALEAH, FL 33012

New Mailing Address:

P.O. BOX 161222
HIALEAH, FL 33016 US

FEI Number: 65-0910521

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ACOSTA, EFRAIN F
2214 WEST 74 TERRACE
HIALEAH, FL 33016 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: ACOSTA, EFRAIN F
Address: 2214 W. 74 TERRACE
City-St-Zip: HIALEAH, FL 33016

Title: SD () Delete
Name: PAUL, HENRY C
Address: 7552 W. 29TH WAY
City-St-Zip: HIALEAH, FL 33018

Title: TD () Delete
Name: GARCIA, CLAUDIO A
Address: 8827 N.W. 112 ST.
City-St-Zip: HIALEAH, FL 33018

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 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: EFRAIN F. ACOSTA

PD

04/26/2004

Electronic Signature of Signing Officer or Director

Date