


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2006 08:00 AM
Secretary of State

DOCUMENT # N99000002115	
1. Entity Name ILE-TITUM CHURCH OF IFA, USA, INC.	

Principal Place of Business 28501 SW 152 AVE LOT 272 HOMESTEAD, FL 33033	Mailing Address 28501 SW 152 AVE LOT 272 HOMESTEAD, FL 33033
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DO NOT WRITE IN THIS SPACE



03112006 No Chg-NP CR2E037 (11/05)

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

8. Name and Address of Current Registered Agent

LORIGA, FRANCISCO O ESQ.
28501 SW 152 AVE
LOT 272
HOMESTEAD, FL 33033

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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 registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	1100000478329 04/08/06-80001-014 61.25
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MEDINA, JOSE M 96401 OVERSEAS HWY #6 KEY LARGO, FL 33037
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VO GOMEZ, LAZARO 5175 NW 1ST ST. MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD RUBIO, JOSE A 1000 SW 94TH AVE. MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S PACHECO, JOSE P 28501 SW 152 AVE HOMESTEAD, FL 33033
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  March 10, 2006 (305) 969-851

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #