2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002647

FILED Apr 30, 2008 Secretary of State

Entity Name: IGLESIA CRISTIANA MISION DE AMOR, INC.

Current Principal Place of Business: New Principal Place of Business: 9318 E. COLONIAL DR. 1456 S. SEMORAN BLVD. ORLANDO, FL 32807 SUITE B-5 ORLANDO, FL 32807 **New Mailing Address: Current Mailing Address:** P.O. BOX 677430 ORLANDO, FL 32867 FEI Number: 59-3625787 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: RIOS, ANGEL 2555 NEWBOLT DRIVE ORLANDO, FL 32817 US 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: **PRES** () Delete () Change () Addition RIOS, ANGEL Name: Name: 2555 NEWBOLT DRIVE Address: Address: City-St-Zip: ORLANDO, FL 32817 City-St-Zip: Title: VICE Title: () Delete () Change () Addition RIOS, SANDRA Name: Name: Address: 2555 NEWBOLT DRIVE Address: City-St-Zip: ORLANDO, FL 32817 City-St-Zip: Title: () Delete Title: DT (X) Change () Addition DEL RIO, HIRAM DEL RIO, HIRAM Name: Name: 452 REGAL DOWNS DR. Address: 1109 NOLTON WAY Address: City-St-Zip: ORLANDO, FL 32822 City-St-Zip: WINTER GARDEN, FL 34787 Title: () Delete Title: (X) Change () Addition Name: DEL RIO, ROSA Name: DEL RIO, ROSA 634 ROMANO AVENUE Address: Address: 452 REGAL DOWNS DR. City-St-Zip: ORLANDO, FL 32807 City-St-Zip: WINTER GARDEN, FL 34787 Title: () Delete Title: () Change () Addition RIVERA, MARILUZ Name: Name: 824 TUCKER AVE. Address: Address: City-St-Zip: ORLANDO, FL 32807 City-St-Zip: Title: () Delete Title: () Change () Addition ROSA, SYLVIA Name: Name: Address: 301 HILLSIDE AVE. # 315 Address: ORLANDO, FL 32803 City-St-Zip: 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: ANGEL L. RIOS P 04/30/2008