

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002754

FILED  
Jan 06, 2009  
Secretary of State

**Entity Name:** UNIDOS EN ALABANZA-IGLESIA DEFENSORES DE LA FE CRISTIANA, INC.

**Current Principal Place of Business:**

5311 MACBETH COURT  
TAMPA, FL 33624

**New Principal Place of Business:**

**Current Mailing Address:**

5311 MACBETH COURT  
TAMPA, FL 33624

**New Mailing Address:**

**FEI Number:** 59-3529589

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

AVILES, NICOLAS REV  
5311 MACBETH COURT  
TAMPA, FL 33624 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: PED ( ) Delete  
Name: AVILES, NICOLAS REV  
Address: 5311 MACBETH COURT  
City-St-Zip: TAMPA, FL 33624

Title: VD ( ) Delete  
Name: AVILES, SARA F  
Address: 5311 MACBETH COURT  
City-St-Zip: TAMPA, FL 33624

Title: TD ( ) Delete  
Name: RAMOS, VICTORIA  
Address: 4914 TRASKWOOD CT.  
City-St-Zip: TAMPA, FL 33624

Title: D ( ) Delete  
Name: DEL VALLE, CHRISTINA  
Address: 11809 BRANCH MOORING DRIVE  
City-St-Zip: TAMPA, FL 33635

Title: D ( ) Delete  
Name: ZAYAS, MARIA  
Address: 6426 SAWYER RD.  
City-St-Zip: TAMPA, FL 33634

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**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:

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

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

Title: D ( ) Change (X) Addition  
Name: MARTINEZ, WILSON  
Address: 10413 N ASHLEY ST  
City-St-Zip: TAMPA, FL 33612

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: REV. NICOLAS AVILES

PED

01/06/2009

Electronic Signature of Signing Officer or Director

Date