

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003357

FILED
Mar 06, 2007
Secretary of State

Entity Name: SAN FRANCISCO DE ASIS EPISCOPAL CHURCH, INC.

Current Principal Place of Business:

15650 MIAMI LAKEWAY NORTH
MIAMI LAKES, FL 33014

New Principal Place of Business:

Current Mailing Address:

2441 N.W. 93 AVE.
STE 101
MIAMI, FL 33172

New Mailing Address:

FEI Number: 65-0923657 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MESA, MANUEL A ESQ.
2441 N.W. 93 AVE. SUITE 101
MIAMI, FL 33172 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: D () Delete
Name: PERUYERO, GLORIA
Address: 15650 MIAMI LAKEWAY NORTH
City-St-Zip: MIAMI LAKES, FL 33014

Title: D () Delete
Name: MESA, MANUEL G
Address: 15650 MIAMI LAKEWAY NORTH
City-St-Zip: MIAMI LAKES, FL 33014

Title: D () Delete
Name: BETANCOURT, XIOMARA
Address: 15650 MIAMI LAKEWAY NORTH
City-St-Zip: MIAMI LAKES, FL 33014

Title: D () Delete
Name: PINEDA, OSCAR REV.
Address: 15650 MIAMI LAKEWAY NORTH
City-St-Zip: MIAMI LAKES, FL 33014

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: PERUYERO, BRAULIO
Address: 162 NORMANDIE DR
City-St-Zip: TAVERNIER, FL 33070

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

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

Title: D (X) Change () Addition
Name: DE MIRANDA, MARIO REV.
Address: 15650 MIAMI LAKEWAY NORTH
City-St-Zip: MIAMI LAKES, FL 33014

Title: D () Change (X) Addition
Name: OLIVA, MIGUEL
Address: 660 EAST 10TH PLACE
City-St-Zip: HIALEAH, FL 33010

Title: D () Change (X) Addition
Name: LEZCANO, JULIA
Address: 6239 WEST 24 AVE
City-St-Zip: HIALEAH, FL 33016

I hereby certify that the information supplied with this filing does not qualify for the 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: MANUEL G MESA

D

03/06/2007

Electronic Signature of Signing Officer or Director

_____ Date