

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N99000003456

**FILED**  
**Feb 28, 2004**  
**Secretary of State****Entity Name:** IGLESIA OASIS DE JESUS INC.**Current Principal Place of Business:**1629 SE 47TH STREET  
CAPE CORAL, FL 33904**New Principal Place of Business:****Current Mailing Address:**1109 SE 15 STREET  
CAPE CORAL, FL 33990**New Mailing Address:****FEI Number:** 65-0933069**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**MANZANO, HECTOR J  
1109 SE 15TH ST  
CAPE CORAL, FL 33990 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:** TD ( ) Delete  
**Name:** MANZANO, HECTOR  
**Address:** 1109 SE 15TH ST.  
**City-St-Zip:** CAPE CORAL, FL 33990**Title:** PD ( ) Delete  
**Name:** MANZANO, ALICIA  
**Address:** 1109 SE 15TH ST.  
**City-St-Zip:** CAPE CORAL, FL 33990**Title:** SD ( ) Delete  
**Name:** LIVERMON, MIRNA  
**Address:** 1000 SW 54 LN  
**City-St-Zip:** CAPE CORAL, FL 33914**Title:** ATD ( ) Delete  
**Name:** ORTIZ, JOSE ANTONIO  
**Address:** 5331 SUMMERLIN RD APT 10  
**City-St-Zip:** FORT MYERS, FL 33919**Title:** ASD ( ) Delete  
**Name:** ARIAS, ANA  
**Address:** 4137 SW 7 AVE  
**City-St-Zip:** CAPE CORAL, FL 33914**Title:** VD ( ) Delete  
**Name:** ALE, OMAR  
**Address:** 902 SE 31 STREET  
**City-St-Zip:** CAPE CORAL, FL 33904**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:** ( ) 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: OMAR ALE

VD

02/28/2004

Electronic Signature of Signing Officer or Director

Date