

2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Oct 04, 2006
Secretary of State

DOCUMENT# N99000007033

Entity Name: CENTRO BIBLICO CAMINO DE FE, ASSEMBLIES OF GOD, INC.**Current Principal Place of Business:**3266 NW 99TH WAY
CORAL SPRINGS, FL 33065**New Principal Place of Business:****Current Mailing Address:**P O BOX 100091
FORT LAUDERDALE, FL 33310**New Mailing Address:****FEI Number:** 65-0788306**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ROSELL, MARIA C
9055 WILES RD.
CORAL SPRINGS, FL 33067 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:** PD () Delete
Name: ROSELL, MARIA C
Address: 9055 WILES RD.
City-St-Zip: CORAL SPRINGS, FL 33067**Title:** TD () Delete
Name: ESPINOZA, DANIEL
Address: 6322 NW 14 CT.
City-St-Zip: MARGATE, FL 33063**Title:** VPD () Delete
Name: MIRANDA, RAMON
Address: 9055 WILES RD.
City-St-Zip: CORAL SPRINGS, FL 33067**Title:** SD () Delete
Name: ESPINOZA, JENI
Address: 6322 NW 14 CT
City-St-Zip: MARGATE, FL 33063**Title:** DT (X) Delete
Name: MELETICHE, LIDIA
Address: 3630 NW 80 AV.
City-St-Zip: CORAL SPRINGS, FL 33065**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** TD (X) Change () Addition
Name: CORDERO, ROBERTO
Address: 6840 NW 9TH ST
City-St-Zip: MARGATE, FL 33063**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** SD (X) Change () Addition
Name: GAETA, CATHY
Address: 3266 NW 99 WAY
City-St-Zip: CORAL SPRINGS, FL 33065**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 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: MARIA C ROSELL

PRES

10/04/2006

Electronic Signature of Signing Officer or Director

Date