2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000007033

FILED May 07, 2007 Secretary of State

Entity Name: CENTRO BIBLICO CAMINO DE FE, ASSEMBLIES OF GOD, INC.

Current Principal Place of Business: New Principal Place of Business:

3266 NW 99TH WAY CORAL SPRINGS, FL 33065

Current Mailing Address: New Mailing Address:

P O BOX 100091 6840 NW 9 STREET FORT LAUDERDALE, FL 33310 MARGATE, FL 333063

FEI Number: 65-0788306 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

ROSELL, MARIA C
9055 WILES RD.
CORAL SPRINGS, FL 33067 US

ROSELL, MARIA C
6840 NW 9STREET
MARGATE, FL 33063 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: 05/07/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PD () Delete Title: PD (X) Change () Addition

 Name:
 ROSELL, MARIA C
 Name:
 ROSELL, MARIA C

 Address:
 9055 WILES RD.
 Address:
 6840 NW 9 STREET

 City-St-Zip:
 CORAL SPRINGS, FL 33067
 City-St-Zip:
 MARGATE, FL 33063

Title: TD () Delete Title: () Change () Addition

 Name:
 CORDERO, ROBERTO
 Name:

 Address:
 6840 NW 9TH ST
 Address:

 City-St-Zip:
 MARGATE, FL 33063
 City-St-Zip:

Title: VPD () Delete Title: VPD (X) Change () Addition Name: MIRANDA, RAMON Name: MIRANDA, RAMON

 Address:
 9055 WILES RD.
 Address:
 6840 NW 9 STREET

 City-St-Zip:
 CORAL SPRINGS, FL 33067
 City-St-Zip:
 MARGATE, FL 33063

Title: SD () Delete Title: VTD (X) Change () Addition

 Name:
 GAETA, CATHY
 Name:
 MIRANDA, LIANET

 Address:
 3266 NW 99 WAY
 Address:
 6840 NW 9 STREET

 City-St-Zip:
 CORAL SPRINGS, FL 33065
 City-St-Zip:
 MARGATE, FL 33063

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: MARIA C ROSELL PD 05/07/2007