

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000007033

FILED
Mar 20, 2009
Secretary of State

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

Current Principal Place of Business:

6279 W. SAMPLE RD
CORAL SPRINGS, FL 33067

New Principal Place of Business:

Current Mailing Address:

6840 NW 9TH STREET
MARGATE, FL 333063

New Mailing Address:

6840 NW 9TH STREET
MARGATE, FL 33063

FEI Number: 65-0788306

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ROSELL, MARIA C
6840 NW 9TH STREET
MARGATE, FL 33063 US

Name and Address of New Registered Agent:

ROSELL, MARIA C
6840 NW 9TH STREET
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:

03/20/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ROSELL, MARIA C
Address: 6840 NW 9TH STREET
City-St-Zip: MARGATE, FL 33063

Title: TD () Delete
Name: CORDERO, ROBERTO
Address: 6840 NW 9TH ST
City-St-Zip: MARGATE, FL 33063

Title: VPD () Delete
Name: MIRANDA, RAMON
Address: 6840 NW 9 STREET
City-St-Zip: MARGATE, FL 33063

Title: VTD () Delete
Name: MIRANDA, LIANET
Address: 6840 NW 9 STREET
City-St-Zip: MARGATE, FL 33063

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

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: SD () Change (X) Addition
Name: CORDOVA, MAGDA
Address: 9008 NW 38TH DRIVE
City-St-Zip: CORAL SPRINGS, FL 33065

Title: DT () Change (X) Addition
Name: MELETICHE, FELICITA
Address: STREET ANDREW TOWERS 2700 NW 99TH AVE.
City-St-Zip: CORAL SPRINGS, FL 33065

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 ROSELL SILVENTE

PD

03/20/2009

Electronic Signature of Signing Officer or Director

Date