

**2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jul 28, 2005  
Secretary of State**

DOCUMENT# N99000007568

Entity Name: IGLESIA NUEVA ESPERANZA, INC.

**Current Principal Place of Business:**

3620 BALLAST POINT BLVD.  
TAMPA, FL 33611

**New Principal Place of Business:**

5844 SOUTH DALE MABRY  
TAMPA, FL 33611

**Current Mailing Address:**

530 TUSCANNY STREET  
BRANDON, FL 33511

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )  
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:**

GUILLEN, EVANGELINA  
4011 S. MANHATTAN AVE., APT. 315  
TAMPA, FL 33611 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:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: VELASQUEZ, JOSE  
Address: 530 TUSCANNY STREET  
City-St-Zip: BRANDON, FL 33511

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

Title: D ( ) Delete  
Name: GUILLEN, EVANGELINA  
Address: 4011 S MANHATTAN AVE APT 315  
City-St-Zip: TAMPA, FL 33611

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

Title: D ( ) Delete  
Name: GONZALEZ, BIENVENIDO  
Address: 6309 S ADELIA AVE  
City-St-Zip: TAMPA, FL 33616

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: JOSE VELASQUEZ

D

07/28/2005

Electronic Signature of Signing Officer or Director

Date