

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000036952

FILED
Aug 05, 2004
Secretary of State

Entity Name: INTERAMERICAN CHRISTIAN CENTER INC.

Current Principal Place of Business:

1501 NORTHWEST 28TH STREET
MIAMI, FL 33142

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 420482
MIAMI, FL 33242

New Mailing Address:

FEI Number: 65-0757367

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EDEN, ELISABETH
13365 SW 42 TERR
MIAMI, FL 33175 US

Name and Address of New Registered Agent:

EDEN, ELISABETH
2795 SW 113 AVE
MIAMI, FL 33165 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:

08/05/2004

Electronic Signature of Registered Agent

Date

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: EDEN, ELISABETH
Address: 13365 S.W. 42ND TERR
City-St-Zip: MIAMI, FL 33175

Title: D () Delete
Name: GARCIA-CORNER, NANCY
Address: 2840 NW 22ND CT
City-St-Zip: MIAMI, FL 33142

Title: D () Delete
Name: RAMOS, JONATHAN
Address: 5421 NW 179TH TERRACE
City-St-Zip: MIAMI, FL 33314

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: EDEN, ELISABETH
Address: 2795 SW 113 AVE
City-St-Zip: MIAMI, FL 33165

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ELISABETH EDEN

DIRE

08/05/2004

Electronic Signature of Signing Officer or Director

Date