

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 30, 2004
Secretary of State**

DOCUMENT# N03000005080

Entity Name: IGLESIA PRINCIPE DE PAZ PCA, INC.

Current Principal Place of Business:

4700 SW 188TH AVENUE
SOUTH WEST RANCHES, FL 33332

New Principal Place of Business:

Current Mailing Address:

4700 SW 188TH AVENUE
SOUTH WEST RANCHES, FL 33332

New Mailing Address:

FEI Number: 04-3763348 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAUE, HANS
4700 SW 188TH AVENUE
SOUTH WEST RANCHES, FL 33332 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: D () Delete
Name: SAENZ, HERNANDO
Address: 623 WOODGATE CIRCLE
City-St-Zip: SUNRISE, FL 33326

Title: D () Delete
Name: KELSO, BRIAN
Address: 18274 NW 21ST STREET
City-St-Zip: PEMBROKE PINES, FL 33029

Title: D () Delete
Name: LAUE, HANS
Address: 1518 NW 183RD TERRACE
City-St-Zip: PEMBROKE PINES, FL 33029

Title: D () Delete
Name: LOPEZ, JOSHUE
Address: 820 NW 15TH AVENUE
City-St-Zip: MIAMI, FL 33125

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:

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: HERNANDO SAENZ

D

01/30/2004

Electronic Signature of Signing Officer or Director

_____ Date