2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

Apr 24, 2006 8:00 am Secretary of State DOCUMENT # N04000007363 1. Entity Name 04-24-2006 90365 019 ****61.25 MINISTERIO INTERNACIONAL EL REY JESUS/DORAL, Principal Place of Business Mailing Address 3900 NW 79 AVENUE, #400 3900 NW 79 AVENUE, #400 MIAMI FL 33172 MIAMI FL 33172 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State City & State 4. FEI Number Applied For 84-1655763 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name JIMENEZ-DIAZ, P.A. Street Address (P.O. Box Number is Not Acceptable) 9753 S. ORANGE BLOSSOM TRAIL SUITE 101 ORLANDO FL 32837 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or photed name of registered agent and lifte if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Due By May 1, 2006 Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. ☐ Delete TIDE TITLE ☐ Change LOPEZ, FRANK NAME NAME OLDRIN VALDES 3900 N.W. 79 AVE #400 STREET ADDRESS 3900 NW 79 AVENUE, #400 STREET ADDRESS MIAMI FL 33172 CITY-ST-ZIP CITY-ST-ZIP MIAMI, FL 33/72 DS TITLE Delete TITLE 7.0 Addition Change ADOLFO SUMPLET 3900 N.W. 79 AVE #400 LOPEZ, ZAYDA NAME 3900 NW 79 AVENUE, #400 STREET ADDRESS STREET ADDRESS MIAMI FL 33172 CITY-ST-7IP CITY-ST-7IP MUANI, FL 33172 TITLE ☐ Delete TITLE ☐ Change Addition NAME MONTES DE OCA, HORACIO NAME STREET ADDRESS 3900 NW 79 AVENUE, #400 STREET ADDRESS CITY-ST-ZIP MIAMI FL 33172 CITY-ST-ZIP TITLE Oclete TITLE Change ■ Addition HERNANDEZ, FRANK NAME NAME STREET ADDRESS 3900 NW 79 AVENUE, #400 STREET ADDRESS CITY-ST-ZIP MIAMI FL 33172 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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HORACIO MONTES DE DEA 9/1/06 (954) 804-1425 uno de da SIGNATURE:

12. Hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Section 119, Florida Statutes, I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11

if changed, or on an attachment with an address, with all other like empowered