2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000004230

FILED Mar 27, 2009 Secretary of State

Entity Name: MINISTERIO INTERNACIONAL ENCUENTRO CON LA VIDA INC.

Current Principal Place of Business: New Principal Place of Business: 5088 SUMMIT BLVD WEST PALM BEACH, FL 33415 **Current Mailing Address: New Mailing Address:** 3526 MOUNTAIN SIDE CIRCLE 941 SOUTH MILITARY TRAIL WEST PALM BEACH, FL 33406 WEST PALM BEACH, FL 33415 FEI Number: 20-4711614 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ESPINOSA, JOSE L 3526 MOUNTAIN SIDE CIRCLE WEST PALM BEACH, FL 33406 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: () Delete () Change () Addition ESPINOSA, JOSE L Name: Name: 3526 MOUNTAIN SIDE CIRCLE Address: Address: City-St-Zip: WEST PALM BEACH, FL 33406 City-St-Zip: Title: () Delete Title: V/P (X) Change () Addition DOROSCUK, DANTE Name: GONZALEZ, AARON Name: Address: 3526 MOUNTAIN SIDE CIRCLE Address: 720 HILLCREST BLVD. City-St-Zip: WEST PALM BEACH, FL 33406 City-St-Zip: WEST PALM BEACH, FL 33405 Title: () Delete Title: (X) Change () Addition GONZALEZ, AARON ESPINOSA, LUCAS Name: Name: 720 HILLCREST BLVD Address: Address: 815 MACY STREET City-St-Zip: WEST PALM BEACH, FL 33405 City-St-Zip: WEST PALM BEACH, F 33405 Title: TRE () Delete Title: (X) Change () Addition ESPINOSA, LUCAS Name: Name: DOMINGUEZ, NERLIN 3526 MOUNTAIN SIDE CIRCLE Address: Address: 717 MCINTOSH City-St-Zip: WEST PALM BEACH, FL 33405 City-St-Zip: WEST PALM BEACH, FL 33405 Title: SECR (X) Delete Title: () Change () Addition DOMINGEZ, NERLIN Name: Name: 3526 MOUNITAIN SIDE CIRCLE Address: Address: City-St-Zip: WEST PALM BEACH, FL 33405 City-St-Zip:

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: JOSE LUIS ESPINOSA P 03/27/2009