

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000011375

FILED
Feb 27, 2009
Secretary of State

Entity Name: MINISTERIOS LA RED,INC

Current Principal Place of Business:

310 1 STREET NE
B & C
RUSKIN, FL 33570

New Principal Place of Business:

Current Mailing Address:

12715 DUNHILL DR
TAMPA, FL 33624

New Mailing Address:

FEI Number: 32-0222859

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARILLAS, BALESKA
12715 DUNHILL DR
TAMPA, FL 33624 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: P () Delete
Name: BARILLAS, MARVIN E
Address: 12715 DUNHILL DR
City-St-Zip: TAMPA, FL 33624

Title: VP () Delete
Name: BARILLAS, ANGEL E
Address: 12715 DUNHILL DR
City-St-Zip: TAMPA, FL 33624

Title: MEM () Delete
Name: BALDERAS, VICTOR
Address: 1328 ATLANTIC DR
City-St-Zip: RUSKIN, FL 33570

Title: SEC () Delete
Name: TORO, LUIS
Address: 12843 COVERDALE DR
City-St-Zip: TAMPA, FL 33624

Title: MEM () Delete
Name: ESQUIVEL, JUAN
Address: 12740 ADVENTURE DR
City-St-Zip: RIVERVIEW, FL 33579

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:

Title: () Change () Addition
Name:
Address:
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: JUAN ESQUIVEL

MEM

02/27/2009

Electronic Signature of Signing Officer or Director

Date