2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 26, 2009
Secretary of State

DOCUMENT# N08000006727

Entity Name: MINISTERIO DE COMPASION CRISTO LA ROCA INC

Current Principal Place of Business:

940 S MILITARY TRAIL
507
WEST PALM BEACH, FL 33415

New Principal Place of Business:

Current Mailing Address:

940 S MILITARY TRAIL
507
WEST PALM BEACH, FL 33415

New Mailing Address:

FEI Number: 26-3034173 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DELGADO, RAUL
940 S MILITARY TRAIL
#507
WEST PALM BEACH, FL 33415 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:	DELGADO, RAUL	
Address:	940 S MILITARY TRAIL, #507	
City-St-Zip:	WEST PALM BEACH, FL 33415	
Title:	VP	( ) Delete
Name:	DELGADO, MORAIMA	
Address:	940 S MILITARY TRAIL, #507	
City-St-Zip:	WEST PALM BEACH, FL 33415	
Title:	T	( ) Delete
Name:	ACOSTA, DELMA	
Address:	2793 KENTUCKY ST	
City-St-Zip:	WEST PALM BEACH, FL 33415	
Title:	S	(X) Delete
Name:	PEREZ, FANNY	
Address:	4136 LINDA LN #3	
City-St-Zip:	WEST PALM BEACH, FL 33406	
Title:	S	( ) Delete
Name:	VASQUEZ, FRANCISCO	
Address:	2724 NELSON DR	
City-St-Zip:	WEST PALM BEACH, FL 33406	
Title:	S	(X) Delete
Name:	ALAS, ANTONIO	
Address:	2793 KENTUCKY ST	
City-St-Zip:	WEST PALM BEACH, FL 33406	

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:	
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: RAUL DELGADO PRES 01/26/2009

Electronic Signature of Signing Officer or Director — Date