

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 29, 2009  
Secretary of State**

DOCUMENT# N08000010447

Entity Name: ALEJANDRO ARIAS INTERNATIONAL MINISTRIES, INC.

**Current Principal Place of Business:**

13951 SW 272ND ST  
HOMESTEAD, FL 33032

**New Principal Place of Business:**

**Current Mailing Address:**

13951 SW 272ND ST  
HOMESTEAD, FL 33032

**New Mailing Address:**

FEI Number: 26-3716656      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

NARDELLA, JR., ANTHONY M ESQ.  
315 E ROBINSON ST  
SUITE 600  
ORLANDO, FL 32801 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: ARIAS, ALEJANDRO  
Address: 13951 SW 272ND ST  
City-St-Zip: HOMESTEAD, FL 33032

Title: D ( ) Delete  
Name: ALARD, ENRIQUE S  
Address: 8750 SW 120 ST  
City-St-Zip: MIMAI, FL 33176

Title: D ( ) Delete  
Name: BAAD, RANDALL  
Address: 27109 NW CR 241  
City-St-Zip: ALACHUA, FL 32615

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: ALARD, ENRIQUE S  
Address: 8750 SW 120 ST  
City-St-Zip: MIAMI, FL 33176

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: /ALEJANDRO ARIAS/

D

04/29/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date