

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Oct 09, 2008
Secretary of State

DOCUMENT# N17579

Entity Name: MINISTERIO NUEVA JERUSALEN INTERNACIONAL INCORPORATED**Current Principal Place of Business:**5400 SW 122 AVENUE
MIAMI, FL 33175**New Principal Place of Business:****Current Mailing Address:**5400 SW 122 AVENUE
MIAMI, FL 33175**New Mailing Address:****FEI Number:** 59-2732176**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**CORDONES, DANIEL
5400 SW 122 AVENUE
MIAMI, FL 33175 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: CORDONES, DANIEL
Address: 1030 NW 129 PL
City-St-Zip: MIAMI, FL 33182**Title:** T () Delete
Name: LOPEZ, OSWALDO
Address: 11243 SW 159 PL
City-St-Zip: MIAMI, FL 33196**Title:** S () Delete
Name: IRAL, GLORIA
Address: 5400 SW 122 AVE
City-St-Zip: MIAMI, FL 33175**Title:** D (X) Delete
Name: CORDONES, MAYTE
Address: 1030 NW 129 PL
City-St-Zip: MIAMI, FL 33182**Title:** V () Delete
Name: MIGUEL, VICTORIA
Address: 1305 SW 143 COURT
City-St-Zip: MIAMI, FL 33184**Title:** D () Delete
Name: CORDONES, PATRICIA
Address: 15531 SW 149 CT
City-St-Zip: MIAMI, FL 33187**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** S (X) Change () Addition
Name: CORDONES, MAYTE
Address: 5400 SW 122 AVE
City-St-Zip: MIAMI, FL 33175**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: DANIEL CORDONES

P

10/09/2008

Electronic Signature of Signing Officer or Director_____
Date