

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006504

FILED  
Apr 28, 2005  
Secretary of State

Entity Name: MINISTERIO DIOS ETERNO, INC.

**Current Principal Place of Business:**

5 NW 11TH AVE  
MIAMI, FL 33130

**New Principal Place of Business:**

**Current Mailing Address:**

2650 NORTHWEST 28TH STREET  
UNIT 903  
MIAMI, FL 33142

**New Mailing Address:**

FEI Number: 65-0878123      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

AMERILAWYER  
343 ALMERIA AVENUE  
CORAL GABLES, FL 33134      US

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

LOPEZ, THELMA E  
2650 NW 28 ST  
903  
MIAMI, FL 33142 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: THELMA E LOPEZ

04/28/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD      ( ) Delete  
Name: LOPEZ, OSCAR  
Address: 2650 NORTHWEST 28TH STREET  
City-St-Zip: MIAMI, FL 33142

Title: VD      ( ) Delete  
Name: LOPEZ, THELMA  
Address: 2650 NORTHWEST 28TH STREET  
City-St-Zip: MIAMI, FL 33142

Title: SD      ( ) Delete  
Name: VILLATORO, JOSE  
Address: 2650 NORTHWEST 28TH STREET  
City-St-Zip: MIAMI, FL 33142

Title: TD      ( ) Delete  
Name: MARRERO, OLMAS  
Address: 2650 NORTHWEST 28TH STREET  
City-St-Zip: MIAMI, FL 33142

**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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: OSCAR LOPEZ

PD

04/28/2005

Electronic Signature of Signing Officer or Director

Date