

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000004164

FILED
Mar 04, 2008
Secretary of State

Entity Name: MINISTERIO INTERNATIONAL EBENEZER INC.

Current Principal Place of Business:

1510 SW FRESNO RD.
PORT ST. LUCIE, FL 33461

New Principal Place of Business:

1510 SW FRESNO RD.
PORT ST. LUCIE, FL 34953

Current Mailing Address:

1510 SW FRESNO RD.
PORT ST. LUCIE, FL 33461

New Mailing Address:

1510 SW FRESNO RD.
PORT ST. LUCIE, FL 34953

FEI Number: 26-0348654

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GALINDO, NOEL H
2814 FRENCH AVE.
LAKE WORTH, FL 33461 US

Name and Address of New Registered Agent:

GALINDO, NOEL H
1510 SW FRESNO RD.
PORT SAINT LUCIE, FL 34953 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: NOEL GALINDO

03/04/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Change (X) Addition
Name: GALINDO, NOEL H
Address: 1510 SW FRESNO RD
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: VP () Change (X) Addition
Name: CORTES, JOSE
Address: 1510 SW FRESNO RD
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: S () Change (X) Addition
Name: WOOD, BELGICA
Address: 2360 SW CABALLERO STREET
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: T () Change (X) Addition
Name: GALINDO, INGRID
Address: 1510 SW FRESNO RD
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: D () Change (X) Addition
Name: MARTINEZ, ARLEN
Address: 1510 SW FRESNO RD
City-St-Zip: PORT SAINT LUCIE, FL 34953

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: NOEL GALINDO

P

03/04/2008

Electronic Signature of Signing Officer or Director

Date