

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

**FILED  
Jan 10, 2009  
Secretary of State**

DOCUMENT# N08000004320

Entity Name: MINISTERIO INTERNACIONAL EL PODER DE LA ORACION INC

**Current Principal Place of Business:**

12100 SW 218 ST  
MIAMI, FL 33170

**New Principal Place of Business:**

**Current Mailing Address:**

12100 SW 218 ST  
MIAMI, FL 33170

**New Mailing Address:**

FEI Number: 26-2610489      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

PINEDA, NEISYLIS M  
12100 SW 218 ST  
MIAMI, FL 33170      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: PTDS ( ) Delete  
Name: PINEDA, NEISYLIS M  
Address: 12100 SW 218 ST  
City-St-Zip: MIAMI, FL 33170

Title: VPTD ( ) Delete  
Name: PINEDA, OMAR G  
Address: 10045 SW 170 TER  
City-St-Zip: MIAMI, FL 33170

Title: SD ( ) Delete  
Name: BURGOS, WILLIAM  
Address: 10045 SW 170 TER  
City-St-Zip: MIAMI, FL 33170

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

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

Title: PD (X) Change ( ) Addition  
Name: PINEDA, NEISYLIS M  
Address: 12100 SW 218 ST  
City-St-Zip: MIAMI, FL 33170

Title: VD (X) Change ( ) Addition  
Name: PINEDA, OMAR G  
Address: 10045 SW 170 TER  
City-St-Zip: MIAMI, FL 33170

Title: SD (X) Change ( ) Addition  
Name: SANCHEZ, SHANI  
Address: 11832 SW 207 STREET  
City-St-Zip: MIAMI, FL 33177

Title: D ( ) Change (X) Addition  
Name: PINEDA, HEIDY J  
Address: 12100 SW 207 STREET  
City-St-Zip: MIAMI, FL 33170

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: NEISYLYS M PINEDA

PD

01/10/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date