

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000003247

FILED
Apr 30, 2009
Secretary of State

Entity Name: MINISTERIO INTERNACIONAL LA HERMOSA, INC.

Current Principal Place of Business:

1801 SW 8 ST
MIAMI, FL 33135

New Principal Place of Business:

Current Mailing Address:

1801 SW 8 ST
MIAMI, FL 33135

New Mailing Address:

FEI Number: 20-8764747

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALVARES, JOSE L
1407 SW 19 ST
MIAMI, FL 33145 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: ALVARES, JOSE L
Address: 1407 SW 19 ST
City-St-Zip: MIAMI, FL 33145

Title: V () Delete
Name: ALVAREZ, MARLENE
Address: 1801 SW 8 ST
City-St-Zip: MIAMI, FL 33135

Title: D () Delete
Name: MOLINA TESORERO, NICOLAS A
Address: 1015 SW 4 ST APT 1
City-St-Zip: MIAMI, FL 33130

Title: S () Delete
Name: ZEQUEIRA, YADIRA
Address: 1081 SW 6 ST APT 12
City-St-Zip: MIAMI, FL 33170

Title: S () Delete
Name: ENAMORADO, DOMINGO
Address: 227 NW 56 AVE
City-St-Zip: MIAMI, FL 33126

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:

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: JOSE L ALVAREZ

P

04/30/2009

Electronic Signature of Signing Officer or Director

Date