

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001471

FILED
Mar 18, 2010
Secretary of State

Entity Name: MINISTERIO APOSTOLICO AVANCE MISIONERO, INC.

Current Principal Place of Business:

9745 TOUCHTON ROAD
STE. 502
JACKSONVILLE, FL 32246 US

New Principal Place of Business:

6651 CRESTLINE DR
JACKSONVILLE, FL 32211 US

Current Mailing Address:

9745 TOUCHTON ROAD
STE. 502
JACKSONVILLE, FL 32246 US

New Mailing Address:

FEI Number: 20-0723479

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ASENCIO, TONY
9745 TOUCHTON RD. 502
JACKSONVILLE, FL 32246 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: PRES
Name: FUNES, ALEX I
Address: 9745 TOUCHTON ROAD, UNIT 502
City-St-Zip: JACKSONVILLE, FL 32246 US

Title: AP
Name: ASENCIO, TONY
Address: 9745 TOUCHTON ROAD
City-St-Zip: JACKSONVILLE, FL 32246 US

Title: VP
Name: FUNES, ROSA Q
Address: 9745 TOUCHTON ROAD, UNIT 502
City-St-Zip: JACKSONVILLE, FL 32246

Title: T
Name: PELAEZ, DIEGO F
Address: 12401 TROPIC DR
City-St-Zip: JACKSONVILLE, FL 32225

Title: D
Name: MEDINA, ORLANDO
Address: 9745 TOUCHTON ROAD
City-St-Zip: JACKSONVILLE, FL 32246

Title: S
Name: RIVERA, NOELIA
Address: 1700 MINDANAO DR UNIT 1414
City-St-Zip: JACKSONVILLE, FL 32246

I hereby 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 all other like empowered.

SIGNATURE: ROSA Q. FUNES

VP

03/18/2010

Electronic Signature of Signing Officer or Director

Date