

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001471

Entity Name: MINISTERIO APOSTOLICO AVANCE MISIONERO, INC.**Current Principal Place of Business:**6651 CRESTLINE DR
JACKSONVILLE, FL 32211**Current Mailing Address:**6651 CRESTLINE DR
JACKSONVILLE, FL 32211 US**FEI Number:** 20-0723479**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DIEGO, PELAEZ
1685 HAWKINS COVE DR E
JACKSONVILLE, FL 32246 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	PRES
Name	FUNES, ALEX I
Address	13308 LOW TIDE WAY
City-State-Zip:	JACKSONVILLE FL 33258

Title	VP
Name	FUNES, ROSA Q
Address	13308 LOW TIDE WAY
City-State-Zip:	JACKSONVILLE FL 33258

Title	S
Name	PADILLA, PETER
Address	2855 ANNISTON RD
City-State-Zip:	JACKSONVILLE FL 32246

Title	OFFICER
Name	LIZAMA, GARLIN
Address	1637 HAWKINS COVE DR E
City-State-Zip:	JACKSONVILLE FL 33246

Title	T
Name	PELAEZ, DIEGO F
Address	1685 HAWKINS COVE DR E
City-State-Zip:	JACKSONVILLE FL 32246

Title	OFFICER
Name	JARAMILLO, VICTOR
Address	4325 AMBERBROOK CT
City-State-Zip:	JACKSONVILLE FL 32224

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: DIEGO PELAEZ**TREASURER****03/04/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date