

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000011640

Entity Name: CLINICA DEL ALMA DR JESUS CHRISTO MINISTRIES CORP.

Current Principal Place of Business:

220 WEST 62ND STREET
HIALEAH, FL 33012

Current Mailing Address:

220 WEST 62ND STREET
HIALEAH, FL 33012

FEI Number: 22-3973142

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

WILLIE J. JONES
2261 NW 58TH STREET
MIAMI, FL 33142 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 PD
Name RODRIGUEZ, AMARILIS
Address 220 WEST 62ND STREET
City-State-Zip: HIALEAH FL 33012

Title VD
Name NUTTER, BILLY
Address 220 WEST 62ND STREET
City-State-Zip: HIALEAH FL 33012

Title SD
Name RODRIGUEZ, BELKY
Address 220 WEST 62ND STREET
City-State-Zip: HIALEAH FL 33012

Title T
Name BATISTA, NILLY
Address 220 WEST 62ND STREET
City-State-Zip: HIALEAH FL 33012

Title D
Name JONES, WILLIE J
Address 220 WEST 62ND STREET
City-State-Zip: HIALEAH FL 33012

Title D
Name MARILUZ, SEQUEIRA
Address 220 WEST 62ND STREET
City-State-Zip: HIALEAH FL 33012

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: WILLIE JONES

D

03/22/2013

Electronic Signature of Signing Officer/Director Detail

Date