Entity Name: MINISTERIO " UN TOQUE DE PODER " CORP.			Secretary of	Secretary of State CC1037275440	
Current Pri	ncipal Place of Business:		66103727	3440	
610 ASH ST. PORT SAINT L	UCIE, FL 34952				
Current Ma	iling Address:				
610 ASH ST PORT SAIN	T. T LUCIE, FL 34952				
FEI Number: 46-3893136 Ce			Certificate of Status Desired: Yes		
Name and A	Address of Current Registered Agent	t:			
RIESTRA, ANA 610 ASH ST.					
PORT SAINT L	UCIE, FL 34952 US				
	UCIE, FL 34952 US	ging its registered office or regis	tered agent, or both, in the State of Florida	ì.	
The above name		ging its registered office or regis		a. 94/30/2017	
The above name	d entity submits this statement for the purpose of chang	ging its registered office or regis			
The above name	d entity submits this statement for the purpose of changes E: RIESTRA ANA	ging its registered office or regis		4/30/2017	
The above name	ed entity submits this statement for the purpose of change E: RIESTRA ANA Electronic Signature of Registered Agent	ging its registered office or regis		4/30/2017	
The above name SIGNATURI Officer/Dire	ed entity submits this statement for the purpose of changes E: RIESTRA ANA Electronic Signature of Registered Agent Elector Detail :		C	4/30/2017	
The above name SIGNATURI Officer/Dire Title	ed entity submits this statement for the purpose of changes E: RIESTRA ANA Electronic Signature of Registered Agent Elector Detail : P	Title	P	4/30/2017	
The above name SIGNATURI Officer/Dire Title Name	et entity submits this statement for the purpose of changes E: RIESTRA ANA Electronic Signature of Registered Agent Elector Detail : P RIESTRA, ANA Y 610 ASH ST.	Title Name	P RIESTRA, ANA Y	4/30/2017	
The above name SIGNATURI Officer/Dire Title Name Address	et entity submits this statement for the purpose of changes E: RIESTRA ANA Electronic Signature of Registered Agent Elector Detail : P RIESTRA, ANA Y 610 ASH ST.	Title Name Address	P RIESTRA, ANA Y 610 ASH ST.	4/30/2017	
The above name SIGNATURI Officer/Dire Title Name Address City-State-Zip:	E: RIESTRA ANA Electronic Signature of Registered Agent E: RIESTRA ANA Electronic Signature of Registered Agent Extor Detail : P RIESTRA, ANA Y 610 ASH ST. PORT SAINT LUCIE FL 34952	Title Name Address City-State-Zip:	P RIESTRA, ANA Y 610 ASH ST. PORT ST. LUCIE FL 34952	4/30/2017	
The above name SIGNATURI Officer/Dire Title Name Address City-State-Zip: Title	E: RIESTRA ANA Electronic Signature of Registered Agent Cotor Detail : P RIESTRA, ANA Y 610 ASH ST. PORT SAINT LUCIE FL 34952	Title Name Address City-State-Zip: Title	P RIESTRA, ANA Y 610 ASH ST. PORT ST. LUCIE FL 34952 SECR	4/30/2017	

Title

Name

Address

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13000007585

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: ANA Y. RIESTRA

SECR

CHEZ, DIANA E

610 ASH ST.

City-State-Zip: PORT SAINT LUCIE FL 34952

Title

Name

Address

Electronic Signature of Signing Officer/Director Detail

SECR

610 ASH

CHEZ, DIANA E

City-State-Zip: PORT SAINT LUCIE FL 34952

04/30/2017

FILED Apr 30, 2017