

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N40127

**Entity Name:** MINISTRY OF HELP AND EVANGELISM "CHRIST LOVES YOU",  
INCORPORATED

**FILED**  
**Feb 19, 2016**  
**Secretary of State**  
**CC2300837142**

**Current Principal Place of Business:**

17920 NW 44TH AVE.  
MIAMI GARDENS, FL 33055

**Current Mailing Address:**

17920 NW 44TH AVE.  
MIAMI GARDENS, FL 33055 US

**FEI Number: 65-0343193**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

CARDONA, ANA CPRES  
17920 NW 44TH AVE  
MIAMI GARDENS, FL 33055 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            PRESIDENT  
Name            CARDONA, ANA C  
Address        17920 NW 44TH AVE  
City-State-Zip: MIAMI FL 33055

Title            SECRETARY  
Name            CARDONA, CARMEN L  
Address        17920 NW. 44TH AVE.  
City-State-Zip: MIAMI GARDENS FL 33055

Title            TREASURER  
Name            CARDONA, ELIEZER  
Address        17920 NW 44 AVENUE  
City-State-Zip: MIAMI GARDENS FL 33055

Title            VOCAL  
Name            CHANES, ESTHER  
Address        1035 SE 8TH AVE  
City-State-Zip: HIALEAH FL 33010

Title            VOCAL  
Name            ANTONIO, JULIANA  
Address        6201 SW 24TH ST  
City-State-Zip: MIRAMAR FL 33023

Title            VOCAL  
Name            MATUTE, ELIZABETH  
Address        901 E. 22ND ST  
City-State-Zip: HIALEAH FL 33013

Title            VOCAL  
Name            SANTIAGO, MERCY  
Address        1801 NW 3RD ST  
City-State-Zip: MIAMI FL 33125

*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 C.CARDONA**

**PRESIDENT**

**02/19/2016**

Electronic Signature of Signing Officer/Director Detail

Date