


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 07, 2007 8:00 am
Secretary of State

05-07-2007 90062 029 ****75.00

DOCUMENT # 744831 1. Entity Name FUNDACION MISIONERA REDENCION, INC.	
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Principal Place of Business 15611 NW 45 AVENUE CAROL CITY, FL 33056	Mailing Address 3930 NW 175TH ST. CAROL CITY, FL 33055
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DO NOT WRITE IN THIS SPACE



04152007 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-2821510	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

8. Name and Address of Current Registered Agent

POLANCO, LUGINIO (REV)
121 N.W. 4TH. AVE.
DANIA, FL., FL 33004

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input checked="" type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD POLANCO, LUGINIO (REV) 3930 N.W. 175TH ST. CAROL CITY, FL 33056
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP RODRIGUEZ, LUCIANO 9 ARABIA AVE. OPA-LOCKA, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD POLANCO, EVA 3930 N.W. 175TH ST. CAROL CITY, FL 33056
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD RODRIGUEZ, EVA 9 ARABIA AVE. OPA-LOCKA, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ALAGASTINO, HECTOR 4040 N.E. POMPANO BEACH, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ALASASTINO, HERMINIA 4040 N.E. POMPANO BEACH, FL

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: Rev. Eugenio Polanco, President 4-18-07-305-624-3822

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #