


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 29, 2004 08:00 AM
Secretary of State

DOCUMENT # N00000004626 1. Entity Name MISSION ESPERANZA INCORPORATED	
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Principal Place of Business
6375 W FLAGLER ST
MIAMI, FL 33144

Mailing Address
6375 W FLAGLER ST
MIAMI, FL 33144



02132004 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

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

6. Name and Address of Current Registered Agent

BENITEZ, JUAN
8513 SW 163 COURT
MIAMI, FL 33193

**DO NOT WRITE
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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GALLARDO, LENIER L REV.DR. 6375 W. FLAGLER STREET MIAMI, FL 33144
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BENITEZ, JUAN 8513 SW 163 CT MIAMI, FL 33193
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BUNKER, JUDITH 160201 SW 95TH AVENUE, SUITE 101 MIAMI, FL 33157
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CARTAYA, ROSA 2880 WEST FLAGLER STREET MIAMI, FL 33144
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RODRIGUEZ, RAFAEL 10967 BIRD ROAD MIAMI, FL 33165
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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03/29/04-80047-021 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

JUAN BENITEZ

02/16/04 (305) 380-7271