

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 06, 2006 08:00 AM
Secretary of State

DOCUMENT # N00000004626	
1. Entity Name MISSION ESPERANZA INCORPORATED	

Principal Place of Business
**6375 W FLAGLER ST
MIAMI, FL 33144**

Mailing Address
**6375 W FLAGLER ST
MIAMI, FL 33144**

DO NOT WRITE IN THIS SPACE



03292006 No Chg-NP

CR2E037 (11/05)

4. FEI Number NOT APPLICABLE	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

8. Name and Address of Current Registered Agent

**BENITEZ, JUAN
8513 SW 183 COURT
MIAMI, FL 33193**

**DO NOT WRITE
IN THIS SPACE**

I, 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 renewing)

DATE

**Filing Fee is \$81.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

**U00000495169
04/20/06-80074-016 61.25**

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	GALLARDO, LENIER L REV.DR.
STREET ADDRESS	6375 W. FLAGLER STREET
CITY-ST-ZIP	MIAMI, FL 33144
TITLE	D
NAME	BENITEZ, JUAN
STREET ADDRESS	8513 SW 183 CT
CITY-ST-ZIP	MIAMI, FL 33193
TITLE	D
NAME	BUNKER, JUDITH
STREET ADDRESS	160201 SW 95TH AVENUE, SUITE 101
CITY-ST-ZIP	MIAMI, FL 33157
TITLE	D
NAME	CARTAYA, ROSA
STREET ADDRESS	2880 WEST FLAGLER STREET
CITY-ST-ZIP	MIAMI, FL 33144
TITLE	D
NAME	DIAZ, EMERIO
STREET ADDRESS	922 NORTHWEST 32 PLACE
CITY-ST-ZIP	MIAMI, FL 33125
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/3/06 786-486-8457