2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000008056

Entity Name: MINISTERIO CRISTO EL REY, INC.

FILED Apr 04, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

 5050 NW 7TH STREET
 4648 NW 107 AVE

 SUITE 108
 SUITE 12507

 MIAMI, FL 33126
 MIAMI, FL 33178

Current Mailing Address: New Mailing Address:

 5050 NW 7TH STREET
 4648 NW 107 AVE

 SUITE 108
 SUITE 108

 MIAMI, FL 33126
 MIAMI, FL 33126

FEI Number: 65-1059793 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

GARCIA, IDALMIS DR.
5050 NW 7TH STREET
5050 NW 107 AVE
501TE 2507
601 MIAMI, FL 33126 US
603 MIAMI, FL 33126 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: 04/04/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

le: PD () Delete Title: PD (X) Change () Addition

 Name:
 GARCIA, IDALMIS
 Name:
 GARCIA, IDALMIS

 Address:
 5050 NW 7TH STREET
 Address:
 4648 NW 107 AVE

 City-St-Zip:
 MIAMI, FL 33126
 City-St-Zip:
 MIAMI, FL 33178

Title: VD () Delete Title: VD (X) Change () Addition Name: GARCIA, EDGAR Name: GARCIA, EDGAR

 Name:
 GARCIA, EDGAR
 Name:
 GARCIA, EDGAR

 Address:
 5050 NW 7TH STREET
 Address:
 4648 NW 107 AVE

 City-St-Zip:
 MIAMI, FL 33126
 City-St-Zip:
 MIAMI, FL 33178

 $\label{eq:title:S} {\sf Title:S} \qquad \qquad {\sf S} \qquad {\sf (A) Change (A) Addition}$

 Name:
 HERNANDEZ, ÎLEANA
 Name:
 HERNANDEZ, ÎLEANA

 Address:
 5050 NW 7TH STREET
 Address:
 4648 NW 107 AVE

 City-St-Zip:
 MIAMI, FL 33126
 City-St-Zip:
 MIAMI, FL 33178

 Name:
 GARCIA, AISHA
 Name:
 GARCIA, AISHA

 Address:
 5050 NW 7TH STREET
 Address:
 4648 NW 107 AVE

 City-St-Zip:
 MIAMI, FL 33126
 City-St-Zip:
 MIAMI, FL 33178

 $\label{eq:title:S} {\sf Title:} \qquad {\sf S} \qquad {\sf (1) Delete} \qquad \qquad {\sf Title:} \qquad {\sf S} \qquad {\sf (X) Change (1) Addition}$

 Name:
 HERNANDEZ, ISIS ASST.
 Name:
 HERNANDEZ, ISIS ASST.

 Address:
 5050 NW 7TH STREET
 Address:
 4648 NW 107 AVE

 City-St-Zip:
 MIAMI, FL 33126
 City-St-Zip:
 MIAMI, FL 33178

Title: D () Delete Title: D (X) Change () Addition

 Name:
 GARCIA, JOSHUA
 Name:
 GARCIA, JOSHUA

 Address:
 5050 NW 7TH STREET
 Address:
 4648 NW 107 AVE

 City-St-Zip:
 MIAMI, FL 33126
 City-St-Zip:
 MIAMI, FL 33178

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: AISHA GARCIA TD 04/04/2005