

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000008056

FILED  
Jan 08, 2010  
Secretary of State

Entity Name: MINISTERIO CRISTO EL REY, INC.

**Current Principal Place of Business:**

18221 SW 108 PLACE  
MIAMI, FL 33157

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 971213  
MIAMI, FL 33197

**New Mailing Address:**

18221 SW 108 PLACE  
MIAMI, FL 33157

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

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

GARCIA, IDALMIS DR.  
18221 SW 108TH PLACE  
MIAMI, FL 33157    US

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

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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: GARCIA, IDALMIS I DR  
Address: 18221 SW 108TH PLACE  
City-St-Zip: MIAMI, FL 33197

Title: VD  
Name: GARCIA, EDGAR  
Address: 18221 SW 108 PLACE  
City-St-Zip: MIAMI, FL 33197

Title: S  
Name: HERNANDEZ, ILEANA  
Address: 11545 SW 170 STREET  
City-St-Zip: MIAMI, FL 33157

Title: TD  
Name: GARCIA, AISHA  
Address: 10 FLAGLER DRIVE  
City-St-Zip: MIAMI SPRINGS, FL 33166

Title: S  
Name: HERNANDEZ, ISIS ASST.  
Address: 10945 SW 181 TERRACE  
City-St-Zip: MIAMI, FL 33157

Title: D  
Name: GARCIA, ALEXIS  
Address: 18221 SW 108TH PLACE  
City-St-Zip: MIAMI, FL 33157

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: IDALMIS I GARCIA

DR

01/08/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date