

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000000960

FILED
Apr 29, 2009
Secretary of State

Entity Name: MINISTERIO EVANGELISTICO VINO NUEVO, INC.

Current Principal Place of Business:

5167 S. UNIVERSITY DR
DAVIE, FL 33328

New Principal Place of Business:

Current Mailing Address:

7321 NW 43 CT
LAUDERHILL, FL 33319

New Mailing Address:

FEI Number: 65-1069972

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FIGUEROA, MANUEL E
7321 NW 43RD COURT
LAUDERHILL, FL 33319 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 () Delete
Name: FIGUEROA, MANUEL E
Address: 7321 NW 43 COURT
City-St-Zip: LAUDERHILL, FL 33319

Title: VD () Delete
Name: FIGUEROA, MARIA C
Address: 7321 NW 43 CT
City-St-Zip: LAUDERHILL, FL 33319

Title: SD () Delete
Name: FIGUEROA, MARIA C
Address: 7321 NW 43 CT
City-St-Zip: LAUDERHILL, FL 33319

Title: TD () Delete
Name: FIGUEROA, STEVEN
Address: 7321 NW 43RD CT.
City-St-Zip: LAUDERHILL, FL 33319

Title: D () Delete
Name: FIGUEROA, JOSE
Address: 7321 NW 43 CT
City-St-Zip: LAUDERHILL, FL 33319

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: FIGUEROA MANUEL

PD

04/29/2009

Electronic Signature of Signing Officer or Director

Date