

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 16, 2004 8:00 am
Secretary of State

04-16-2004 90116 030 ****61.25

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1. Entity Name

**EBENEZER HISPANIC MINISTRIES INTERNATIONAL
INCORPORATED**



Principal Place of Business

116 JASON DR
VALRICO FL 33594

Mailing Address

116 JASON DR
VALRICO FL 33594

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



MOORE

CR2E037 (11/03)

4. FEI Number

59-3757880

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**MIRABILIO, HORACIO L
116 JASON DR
VALRICO FL 33954**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

**FILE NOW: FEE IS \$61.25
Due By May 1, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE PD
NAME MIRABILIO, HORACIO L ☐ Delete
STREET ADDRESS 116 JASON DR
CITY-ST-ZIP VALRICO FL 33954

TITLE SD
NAME MARTY, MARIA C ☒ Delete
STREET ADDRESS 1208 E SANDALWOOD DR N
CITY-ST-ZIP PLANT CITY FL 33566

TITLE TD
NAME MALDONADO, EDUARDO S ☐ Delete
STREET ADDRESS 2005 BRANDON CROSSING CIR APT #201
CITY-ST-ZIP BRANDON FL 33511

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TD
NAME MIRABILIO, GABRIEL E ☐ Change ☒ Addition
STREET ADDRESS 737 PROVIDENCE TRACE CIRCLE # 202
CITY-ST-ZIP BRANDON, FLORIDA 33511

TITLE SD ☒ Change ☐ Addition
NAME MALDONADO, EDUARDO S
STREET ADDRESS 413 BIG CEDAR WAY # A
CITY-ST-ZIP BRANDON - FLORIDA 33510

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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

4/13/04

(813) 571-9136

Date

Daytime Phone #