

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003021

FILED
May 01, 2007
Secretary of State

Entity Name: DELAROSA MINISTRIES INC.

Current Principal Place of Business:

PO BOX 340242
TAMPA, FL 336940242

New Principal Place of Business:

16863 LE CLARE SHORES DR
TAMPA, FL 33624

Current Mailing Address:

PO BOX 340242
TAMPA, FL 336940242

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

DELAROSA, WANDA
4718 GRAINARY AVE
TAMPA, FL 33624 US

Name and Address of New Registered Agent:

DELAROSA, WANDA
16863 LE CLARE SHORES DR
TAMPA, FL 33624 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:

05/01/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DELAROSA, LARRY
Address: 4718 GRAINARY AVE
City-St-Zip: TAMPA, FL 33624

Title: SD () Delete
Name: DELAROSA, WANDA
Address: 4718 GRAINARY AVE
City-St-Zip: TAMPA, FL 33624

Title: TD () Delete
Name: SANTIAGO, LUZ
Address: 4407 GULFWIND DR
City-St-Zip: LUTZ, FL 33558

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DELAROSA, LARRY
Address: 16863 LE CLARE SHORES DR
City-St-Zip: TAMPA, FL 33624

Title: SD (X) Change () Addition
Name: DELAROSA, WANDA
Address: 16863 LE CLARE SHORES DR
City-St-Zip: TAMPA, FL 33624

Title: TD (X) Change () Addition
Name: CARDONA, LIA
Address: 5206 CORVETTE DR.
City-St-Zip: TAMPA, FL 33624

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: LARRY DELAROSA

PD

05/01/2007

Electronic Signature of Signing Officer or Director

Date