

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004923

FILED
Mar 05, 2007
Secretary of State

Entity Name: MINISTERIO APOSTOLICO MUNDIAL COMPASION, INC.

Current Principal Place of Business:

9691 ARBOR OAKS COURT
SUITE #107
BOCA RATON, FL 33428

New Principal Place of Business:

Current Mailing Address:

9691 ARBOR OAKS COURT
SUITE #107
BOCA RATON, FL 33428

New Mailing Address:

FEI Number: 03-0471037

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FONSECA, FERNANDO PASTOR
9691 ARBOR OAKS COURT
SUITE #107
BOCA RATON, FL 33428 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: FONSECA, FERNANDO PASTOR
Address: 9691 ARBOR OAKS COURT, SUITE #107
City-St-Zip: BOCA RATON, FL 33428

Title: VD () Delete
Name: FONSECA, CONSUELO
Address: 9691 ARBOR OAKS COURT, SUITE 107
City-St-Zip: BOCA RATON, FL 33428

Title: TD () Delete
Name: CABRE, KERRY
Address: 9691 ARBOR OAKS COURT, SUITE 107
City-St-Zip: BOCA RATON, FL 33428

Title: SD () Delete
Name: LANCHEROS, SONIA
Address: 9691 ARBOR OAKS COURT, SUITE 107
City-St-Zip: BOCA RATON, FL 33428

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:

I hereby certify that the information supplied with this filing does not qualify for the 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: FERNANDO FONSECA

PD

03/05/2007

Electronic Signature of Signing Officer or Director

Date