2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005572

FILED Apr 28, 2005 Secretary of State

Entity Name: AMOR EN ACCION MINISTRIES, INC.

Current Principal Place of Business: New Principal Place of Business: 19342 SW 119 CT MIAMI, FL 33177 **Current Mailing Address: New Mailing Address:** 19342 SW 119 CT MIAMI, FL 33177 FEI Number: 48-1267736 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CANALES, SANTOS P CANALES, SANTOS P 9110 NW 145 STREET 2630 WEST 76TH ST. APT. US MIAMI LAKES, FL 33018 205

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.

HIALEAH, FL 33016 US

SIGNATURE: SANTOS P. CANALES 04/28/2005

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Change () Addition () Delete MAQUEIRA, DANILO Name: Name: 6147 S W 34 COURT Address: Address: City-St-Zip: **DAVIE, FL 33314** City-St-Zip: Title: VD () Delete Title: () Change () Addition RODRIGUEZ, RAFAEL Name: Name: Address: 19342 S W 119 COURT Address: City-St-Zip: MIAMI, FL 33177 City-St-Zip: Title: () Delete Title: () Change () Addition

DIAZ, MERCEDES Name: Name: Address: 1910 W 56 ST APT 3110 Address:

City-St-Zip: HIALEAH, FL 33012 City-St-Zip:

(X) Change () Addition Title: TD () Delete Title: TD CANALES, SANTOS P Name: CANALES, SANTOS P Name: 2630 WEST 76TH ST. APT. # 205 Address: 9110 NW 145 STREET Address: City-St-Zip: MIAMI LAKES, FL 33018 City-St-Zip: HIALEAH, FL 33016

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SANTOS P. CANALES TD 04/28/2005