

2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Aug 28, 2006
Secretary of State

DOCUMENT# N03000001252

Entity Name: MINISTERIO INTERNACIONAL CAMBIADORES DE MUNDO INC.**Current Principal Place of Business:**8230 N.W. SOUTH RIVER DRIVE
MIAMI, FL 33166**New Principal Place of Business:****Current Mailing Address:**8411 JOHNSON ST
PEMBROKE PINES, FL 33024**New Mailing Address:****FEI Number:** 42-1576081**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**RESTREPO, ANDRES A
8411 JOHNSON ST
PEMBROKE PINES, FL 33024 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: P () Delete
Name: BAYARDO, DETRINIDAD J
Address: 20314 NW 52 CT
City-St-Zip: MIAMI, FL 33055 US

Title: VP () Delete
Name: RESTREPO, ANDRES
Address: 8411 JOHNSON ST
City-St-Zip: PEMBROKE PINES, FL 33024 US

Title: VP () Delete
Name: RESTREPO, YADIRA D
Address: 8411 JOHNSON ST
City-St-Zip: PEMBROKE PINES, FL 33024 US

Title: S (X) Delete
Name: CEQUEIRA, LETICIA
Address: 8411 JOHNSON ST
City-St-Zip: PEMBROKE PINES, FL 33024 US

Title: T (X) Delete
Name: PEREZ, NORMA
Address: 301 N.W. 177 ST APTO 135
City-St-Zip: MIAMI, FL 33169 US

Title: AT (X) Delete
Name: WEPPLER, MARIANO A
Address: 8411 JOHNSON ST
City-St-Zip: PEMBROKE PINES, FL 33024 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: RESTREPO, ANDRES
Address: 8411 JOHNSON ST
City-St-Zip: PEMBROKE PINES, FL 33024 US

Title: S (X) Change () Addition
Name: RESTREPO, YADIRA D
Address: 8411 JOHNSON ST
City-St-Zip: PEMBROKE PINES, FL 33024

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: ANDRES RESTREPO

D

08/28/2006

Electronic Signature of Signing Officer or Director

Date