

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002787

FILED
Jul 10, 2004
Secretary of State**Entity Name:** MISION CRISTIANA INTERNACIONAL, INC.**Current Principal Place of Business:**4474 WESTON ROAD
SUITE # 161
WESTON, FL 33331**New Principal Place of Business:****Current Mailing Address:**4474 WESTON ROAD
SUITE # 161
WESTON, FL 33331**New Mailing Address:****FEI Number:** 65-0665773**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**TARELA, RAUL
13725 SW 84TH ST
APT D
MIAMI, FL 33183 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: TARELA, RAUL
Address: 13725 SW 84TH ST APT D
City-St-Zip: MIAMI, FL 33183**Title:** VP () Delete
Name: IPARRAGUIRRE, GUERY
Address: 1080 CREEKFORD DR.
City-St-Zip: WESTON, FL 33326**Title:** SEC () Delete
Name: ALEGRE, SANDRA
Address: 4288 DIAMOND DR.
City-St-Zip: WESTON, FL 33331**Title:** TRES () Delete
Name: ALEGRE, JUAN A
Address: 4288 DIAMOND DR.
City-St-Zip: WESTON, FL 33331**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 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: RAUL TARELA

P

07/10/2004

Electronic Signature of Signing Officer or Director

Date