

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007931

FILED  
Jan 11, 2005  
Secretary of State

Entity Name: MINISTERIO JUAN 3:16, INC.

**Current Principal Place of Business:**

8722 NW 112 ST  
HIALEAH GARDENS, FL 33018

**New Principal Place of Business:**

**Current Mailing Address:**

8722 NW 112 ST  
HIALEAH GARDENS, FL 33018

**New Mailing Address:**

FEI Number: 20-0228492

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DIAZ, O.J.  
7951 SW 40 ST STE 206  
MIAMI, FL 33155 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: DP ( ) Delete  
Name: PEREZ, GUSTAVO  
Address: 8722 NW 112 ST  
City-St-Zip: HIALEAH GARDENS, FL 33018

Title: DS ( ) Delete  
Name: MARTINEZ, JOSE  
Address: 8722 NW 112 ST  
City-St-Zip: HIALEAH GARDENS, FL 33018

Title: DT ( ) Delete  
Name: NUNEZ, ARTURO  
Address: 8722 NW 112 ST  
City-St-Zip: HIALEAH GARDENS, FL 33018

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: DS (X) Change ( ) Addition  
Name: BONACHEA, SURIZADAY  
Address: 8722 NW 112 ST  
City-St-Zip: HIALEAH GARDENS, FL 33018

Title: DT (X) Change ( ) Addition  
Name: CASTILLO, JOSE  
Address: 8722 NW 112 ST  
City-St-Zip: HIALEAH GARDENS, FL 33018

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: GUSTAVO PEREZ

DP

01/11/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date