2006 MOT-FOR-PROFIT CORPORATION ... **ANNUAL REPORT (AR)**

Feb 16, 2006 8:00 am **Secretary of State** DOCUMENT # N03000008362 1. Entity Name 02-16-2006 90041 048 ****61.25 MOVIMIENTO INTERNACIONAL EVANGELICO SENOR DIOS TODOPODEROSO, INC. Principal Place of Business Mailing Address 1236 SW 29 AVE FT LAUDERDALE FL 33312 1236 SW 29 AVE FT LAUDERDALE FL 33312 2. Principal Place of Business 3. Mailing Address 2015.E. 135TREET Suite, Act. #, etc. Suite. Apt. #. etc. 1st MOORE CR2E037 (10/05) City & State City & State 4. FEI Number Applied For FORT LAUDERDALE, FL. 20-0291468 Not Applicable Country USA Country Zip \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CANALES, OVIDIO A Street Address (P.O. Box Number is Not Acceptable) 1236 SW 29 AVE FT LAUDERDALE FL 33312 Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when rainstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Due By May 1, 2006 Trust Fund Contribution. Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. TITLE ☐ Delete ☐ Change ☐ Addition CANALES, OVIDIO A NAME NAME 1236 SW 29 AVE STREET ADDRES STREET ADDRESS FT LAUDERDALE FL 33312 CITY-ST-ZIP CITY-ST-ZIP DILE VD Delete ☐ Change TIFLE Addition PEREZ, JESUS NAME NAME STREET ADDRESS 1731 SW 32 ST STREET ADDRESS FT LAUDERDALE FL 33315 CITY-ST-ZIP CITY-ST-ZIP TITLE STD **X**-Dalais TITLE 🗶-Changs —— 🖃 Addition - 😁 ARACELLY LOBAR 3755 SW 16ET MARTINEZ, JUAN NAME NAME STREET ADDRESS 1611 SW 30 ST STREET ADDRESS FORT LAUDERDALE, FL. 33312-3508 FT LAUDERDALE FL 33315 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes, I turther certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. OVIDIO A. CANALES 02/03/06 954-579-3924 SIGNATURE:

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CITY-ST-7IP