## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000009094

Entity Name: ENCUENTROS MINISTRIES INC.

**FILED** May 01, 2008 Secretary of State

Date

**Current Principal Place of Business: New Principal Place of Business:** 

13820 SW 112TH ST **8187 NW 8 STREET** 104

SUITE 207

MIAMI, FL 33186 MIAMI, FL 33126

**Current Mailing Address: New Mailing Address:** 

P.O. BOX 720515

MIAMI, FL 33172 US

FEI Number: 43-2031737 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

VARGAS-GARCIA, CAMILO JOSE VARGAS GARCIA, CAMILO J 13820 SW 112TH ST 8187 NW 8 STREET

SUITE 207 104

MIAMI, FLORIDA, FL 33186 US MIAMI, FL 33126 US

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: CAMILO V. GARCIA 05/01/2008

Electronic Signature of Registered Agent

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

P/D (X) Change ( ) Addition () Delete VARGAS-GARCIA, CAMILO VARGAS GARCIA, CAMILO J Name: Name:

P.O. BOX 720515 Address: P.O. BOX 720515 Address: MIAMI, FL 33172 US City-St-Zip: MIAMI, FL 33172 US City-St-Zip:

Title: VDTS () Delete Title: S/D (X) Change ( ) Addition

Name: VERA, LEYLA VERONICA Name: VERA, LEYLA V Address: P.O. BOX 720515 Address: P.O. BOX 720515 City-St-Zip: MIAMI, FL 33172 US City-St-Zip: MIAMI, FL 33172 US

Title: () Delete Title: V/D (X) Change ( ) Addition

CARLOS, SOTO SOLARI, ANIBAL D Name: Name: P.O. BOX 720515 Address: P.O. BOX 720515 Address: City-St-Zip: MIAMI, FL 33172 City-St-Zip: MIAMI, FL 33172

Title: () Delete Title: ( ) Change (X) Addition

Name: Name: LLANOS, JOSE FRANCISCO

P.O. BOX 720515 Address: Address: City-St-Zip: City-St-Zip: MIAMI, FL 33172

I hereby certify that the information supplied with this filing does not qualify 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.

Ρ SIGNATURE: CAMILO V. GARCIA 05/01/2008