

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009107

FILED  
Jan 14, 2008  
Secretary of State

Entity Name: MINISTERIO UNIDOS POR CRISTO, INC.

## Current Principal Place of Business:

3702 CARROLLWOOD PL. CIR., APT. 204  
TAMPA, FL 336243073

## New Principal Place of Business:

2704 W. WATERS AVE  
TAMPA, FL 33614

## Current Mailing Address:

3702 CARROLLWOOD PL. CIR., APT. 204  
TAMPA, FL 336243073

## New Mailing Address:

2704 W. WATERS AVE  
TAMPA, FL 33614

FEI Number: 36-4543666

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

GONCALVES, AFONSO H  
3702 CARROLLWOOD PL. CIR., APT. 204  
TAMPA, FL 336243073 US

## Name and Address of New Registered Agent:

TAX HOUSE CORPORATION  
1100 S FEDERAL HWY  
2ND FLOOR  
DEERFIELD BEACH, FL 33441 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: TAX HOUSE CORPORATION

01/14/2008

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: GONCALVES, AFONSO H  
Address: 3702 CARROLLWOOD PL. CIR., APT. 204  
City-St-Zip: TAMPA, FL 336243073

Title: VD ( ) Delete  
Name: HERNANDEZ, REYNALDO  
Address: 2706 W. WATERS AVE.  
City-St-Zip: TAMPA, FL 336141837

Title: TD ( ) Delete  
Name: FERNANDEZ, GUSTAVO U  
Address: 2706 W. WATERS AVE.  
City-St-Zip: TAMPA, FL 336141837

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: TD (X) Change ( ) Addition  
Name: PEREIRA, MARIA G  
Address: 3702 CARROLLWOOD PL. CIR., APT. 204  
City-St-Zip: TAMPA, FL 33624

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.

SIGNATURE: AFONSO H GONCALVES

DP

01/14/2008

Electronic Signature of Signing Officer or Director

Date