## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000009107

Entity Name: MINISTERIO UNIDOS POR CRISTO, INC.

FILED Jan 23, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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2704 W. WATERS AVE TAMPA, FL 33614

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

TAX HOUSE CORPORATION GONCALVES, AFONSO H
1100 S FEDERAL HWY 3702 CARROLLWOOD PLACE CIRCLE

2ND FLOOR 204
DEERFIELD BEACH, FL 33441 US FLORIDA, FL 33624 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: AFONSO GONCALVES 01/23/2009

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP () Delete Title: () Change () Addition

Name: GONCALVES, AFONSO H Name:
Address: 3702 CARROLLWOOD PL. CIR., APT. 204 Address:

City-St-Zip: TAMPA, FL 336243073 City-St-Zip:

Title: VD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 HERNANDEZ, REYNALDO
 Name:

 Address:
 2706 W. WATERS AVE.
 Address:

 City-St-Zip:
 TAMPA, FL 336141837
 City-St-Zip:

Title: TD () Delete Title: () Change () Addition

 Name:
 PEREIRA, MARIA G
 Name:

 Address:
 3702 CARROLLWOOD PL. CIR., APT. 204
 Address:

 City-St-Zip:
 TAMPA, FL 33624
 City-St-Zip:

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 GONCALVES DP 01/23/2009