

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009410

FILED  
May 23, 2012  
Secretary of State

**Entity Name:** EL FARO MINISTRIES AND LANGUAGE SCHOOL, INC

**Current Principal Place of Business:**

2610 SUNRISE RIDGE LANE  
JACKSONVILLE, FL 32211 US

**New Principal Place of Business:**

**Current Mailing Address:**

2610 SUNRISE RIDGE LANE  
JACKSONVILLE, FL 32211 US

**New Mailing Address:**

**FEI Number:** 02-0711701

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CORRALES, OLMES  
2610 SUNRISE RIDGE LANE  
JACKSONVILLE, FL 32211 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:** DIR  
**Name:** CORRALES, OLMES MR.  
**Address:** 2610 SUNRISE RIDGE LANE  
**City-St-Zip:** JACKSONVILLE, FL 32211 US

**Title:** VP  
**Name:** CORRALES, LUZ S MRS.  
**Address:** 2610 SUNRISE RIDGE LANE  
**City-St-Zip:** JACKSONVILLE, FL 32211 US

**Title:** ADM1  
**Name:** CORRALES, ANDRES F MR.  
**Address:** 2610 SUNRISE RIDGE LANE  
**City-St-Zip:** JACKSONVILLE, FL 32211 US

**Title:** ADM2  
**Name:** CORRALES, JUAN P MR.  
**Address:** 2610 SUNRISE RIDGE LANE  
**City-St-Zip:** JACKSONVILLE, FL 32211 US

I hereby 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 all other like empowered.

**SIGNATURE:** OLMES CORRALES

DIR

05/23/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date