

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009417

FILED
Sep 08, 2004
Secretary of State**Entity Name:** MINISTERIO CENTRO CRISTIANO LA UNION DE DIOS, INC.**Current Principal Place of Business:**560 NW 99TH STREET
MIAMI, FL 33150**New Principal Place of Business:****Current Mailing Address:**560 NW 99TH STREET
MIAMI, FL 33150**New Mailing Address:****FEI Number:** **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()****Name and Address of Current Registered Agent:**LOPEZ, WILSON SR.
560 NW 99TH STREET
MIAMI, FL 33150 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:** () Delete
Name:
Address:
City-St-Zip:**Title:** () Delete
Name:
Address:
City-St-Zip:**Title:** () Delete
Name:
Address:
City-St-Zip:**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** PRES () Change (X) Addition
Name: LOPEZ, WILSON
Address: 560 NW 99TH STREET
City-St-Zip: MIAMI, FL 33150 US**Title:** SEC () Change (X) Addition
Name: LOPEZ, LINDA
Address: 560 NW 99TH STREET
City-St-Zip: MIAMI, FL 33150**Title:** V P () Change (X) Addition
Name: DESASAR, ESTELA
Address: 560 NW 99TH STREET
City-St-Zip: MIAMI, FL 33150**Title:** TRES () Change (X) Addition
Name: OSORIO, VERONICA
Address: 560 NW 99TH STREET
City-St-Zip: MIAMI, FL 33150

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: WILSON LOPEZ

PRES

09/08/2004

Electronic Signature of Signing Officer or Director

Date