

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000000508

FILED
Mar 31, 2009
Secretary of State

Entity Name: MINISTERIO BERIT SHALOM, INC.

Current Principal Place of Business:

3611 NW 101 ST
MIAMI, FL 33147

New Principal Place of Business:

Current Mailing Address:

3611 NW 101 ST
MIAMI, FL 33147

New Mailing Address:

P.O BOX 473055
MIAMI, FL 33147

FEI Number: 04-3782746

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ESPINOZA, DONALD A PRES
3611 NW 101 ST
MIAMI, FL 33147 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: P () Delete
Name: ESPINOZA, DONALD A
Address: 3611 NW 101 ST
City-St-Zip: MIAMI, FL 33147

Title: VP () Delete
Name: ESPINOZA, WANDA I
Address: 3611 NW 101 ST
City-St-Zip: MIAMI, FL 33147

Title: T () Delete
Name: HARRINGTON, LUCY
Address: 14319 SW 121 PL
City-St-Zip: MIAMI, FL 33186

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: () Change () Addition
Name:
Address:
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: DONALD ESPINOZA

PRES

03/31/2009

Electronic Signature of Signing Officer or Director

Date