

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000000935

FILED
Apr 28, 2005
Secretary of State

Entity Name: MINISTERIO INTERNACIONAL DE AMOR CRISTIANO INC.

Current Principal Place of Business:

3862 BENTFORD COURT
ORLANDO, FL 32817 US

New Principal Place of Business:

Current Mailing Address:

3862 BENTFORD COURT
ORLANDO, FL 32817 US

New Mailing Address:

FEI Number: 20-0657595

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TORO, TOMAS SR.
3862 BENTFORD CT.
ORLANDO, FL 32817 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: PRES () Delete
Name: BERRIOS, NOEMI R
Address: 3862 BENTFORD CT.
City-St-Zip: ORLANDO, FL 32817 US

Title: VP () Delete
Name: TORO, TOMAS SR.
Address: 3862 BENTFORD CT.
City-St-Zip: ORLANDO, FL 32817 US

Title: SEC. () Delete
Name: TORO, ABDALIS
Address: 3000 COLLEGE DRIVE
City-St-Zip: BLUEFIELD, VA 24605 US

Title: TRES () Delete
Name: TORO, TOMAS Y JR.
Address: 3862 BENTFORD CT.
City-St-Zip: ORLANDO, FL 32817 US

Title: MEMB () Delete
Name: ROSA, ABDALIAS
Address: 760 STREET EMAJAGUAS
City-St-Zip: MAUNABO, PR 00707 PR

Title: MEMB () Delete
Name: VAZQUEZ, MARIELY
Address: EMAJAGUAS BUZON 3108
City-St-Zip: MAUNABO, PR 00707 PR

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:

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City-St-Zip:

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Name:
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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 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: NOEMI R. BERRIOS

PRES

04/28/2005

Electronic Signature of Signing Officer or Director

_____ Date