2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N04000005375

1. Entity Name

KAIROS MINISTRIES OF PERU, INC



FILED Feb 27, 2008 08:00 AN Secretary of State

Principal Place of Business 645 EAST ROSEWOOD LN

TAVARES, FL 32778

Mailing Address

P. O. BOX 574234 ORLANDO, FL 32857



DO NOT WRITE IN THIS SPACE

02222008 No Chg-NP CR2E0

CR2E037 (4/06)

4. FEI Number 00-0005375

Applied Fo

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BERMUDEZ, GUSTAVO 645 EAST ROSEWOOD LANE TAVARES, FL 32778

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the doligations of registered agent.							
SIGNATURE Signature, typed of printed name of registered agent-signature (signature required when reinstating) DATE							
	Filing Fee is \$61.25 Due by May 1, 2008	Election Campaign Financ Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIRE	CTORS					
NAME STREET ADDRESS CITY-ST-ZIP	P BERMUDEZ, GUSTAVO 645 EAST ROSEWOOD LANE TAVARES, FL 32778				14000000100074		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP PEREZ, DAVID 150 PALMYRA AVE ORLANDO, FL 32807			03	03/07/08-80015-015 61.25 DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	RVD. MALPARTIDA, NOÉ AVENIDA LAS COLINAS 131 IQUITOS, PERU, SA 284			DO			
TITLE NAME STREET ADDRESS CITY-SI-ZIP	SEC. ALMARALES, MARTA 5200 OLD CHENEY HIGH WAY ORLANDO, FL 32807			IN THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREA PEREZ, IVIS 1645 PALMYRA AVE ORLANDO, FL 32807						
TITLE NAME STREET ADDRESS CITY-ST-ZIP							

8. 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. I am familiar with, and acc

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the informati indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or direct 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 in Block 10 or Block changed, or on an attachment with an address, with all other like empowered.

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