2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 14, 2008 8:00 am
Secretary of State
02-14-2008 90024 045 ****61.25

DOCUMENT # N04000007361

1. Entity Name
MINISTERIO INTERNACIONAL EL REY JESUS/NAPLES, INC.

Principal Place of Business
977 4TH AVENUE NORTH
NAPLES, FL 34102-9581

Mailing Address
977 4TH AVENUE NORTH
NAPLES, FL 34102-9581

01162008 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #
977 4TH AVENUE, NORTH
Suite, Apt. #, etc.

3. Mailing Address
977 4TH AVENUE, NORTH
Suite, Apt. #, etc.

City & State
NAPLES, FLORIDA
Zip 34102-5814 Country

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NAPLES, FLORIDA
Zip 34102-5814 Country

4. FEI Number ~~APPLIED FOR~~ 20-4580546 Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
LAGOS, FREDY F
11420 WHISTLER'S COVE CIRCLE
APARTMENT # 121
NAPLES, FL 34102-7883

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
182 PALMETTO DUNES CIRCLE
City NAPLES FL Zip Code 34113-7554

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 accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	DP ☐ Delete	TITLE	☑ Change ☐ Addition
NAME	LAGOS, FREDY F	NAME	
STREET ADDRESS	11420 WHISTLER'S COVE CIRCLE APT-121	STREET ADDRESS	182 PALMETTO DUNES CIRCLE
CITY-ST-ZIP	NAPLES, FL 341027883	CITY-ST-ZIP	NAPLES, FL 34113-7554
TITLE	DV ☐ Delete	TITLE	☑ Change ☐ Addition
NAME	LAGOS, BLANCA	NAME	
STREET ADDRESS	11420 WHISTLER'S COVE CIRCLE APT-121	STREET ADDRESS	182 PALMETTO DUNES CIRCLE
CITY-ST-ZIP	NAPLES, FL 341027883	CITY-ST-ZIP	NAPLES, FL 34113-7554
TITLE	DT ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	GARCIA, NORMAN	NAME	
STREET ADDRESS	441 10 STREET NORTH	STREET ADDRESS	
CITY-ST-ZIP	NAPLES, FL 34102	CITY-ST-ZIP	
TITLE	DS ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	ALMODOVAR, MARIBEL	NAME	
STREET ADDRESS	441 10 STREET NORTH	STREET ADDRESS	
CITY-ST-ZIP	NAPLES, FL 34102	CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

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 information 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 02-11-08 239 261 1049
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #