

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 25, 2008
Secretary of State

DOCUMENT# N05000000452

Entity Name: CENTRO MISIONERO MUNDIAL, INC.

Current Principal Place of Business:

1756 SAWGRASS CIRCLE
GREENACRES, FL 33413

New Principal Place of Business:

2411 GREEN GATE CIRCLE SUITE B
WEST PALM BEACH, FL 33415

Current Mailing Address:

1756 SAWGRASS CIRCLE
GREENACRES, FL 33413

New Mailing Address:

PO BOX 16307
WEST PALM BEACH, FL 33416

FEI Number: 20-2187236 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

TORRES, MAGDALENO R
1756 SAWGRASS CIRCLE
GREENACRES, FL 33413 US

Name and Address of New Registered Agent:

TORRES, MAGDALENO R
2411 GREEN GATE CIRCLE SUITE B
WEST PALM BEACH, FL 33415 US

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:

07/25/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: TORRES, MAGDALENO R
Address: 1756 SAWGRASS CIRCLE
City-St-Zip: GREENACRES, FL 33413

Title: D () Delete
Name: DE LOS RIOS, JORGE
Address: 18678 NW 53RD AVE
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: D () Delete
Name: TORRES, JULIA
Address: 1756 SAWGRASS CIRCLE
City-St-Zip: MIAMI, FL 33055

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: TORRES, MAGDALENO R
Address: PO BOX 16307
City-St-Zip: WEST PALM BEACH, FL 33416

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

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

Title: S () Change (X) Addition
Name: RAMOS, DIANA
Address: 1643 SW TAURUS LANE
City-St-Zip: PORT ST. LUCIE, FL 34984

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: DIANA RAMOS

S

07/25/2008

Electronic Signature of Signing Officer or Director

Date