

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000452

FILED  
Apr 15, 2009  
Secretary of State

Entity Name: CENTRO MISIONERO MUNDIAL, INC.

**Current Principal Place of Business:**

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

**New Principal Place of Business:**

6317 CYPRESS LN  
LANTANA, FL 33462

**Current Mailing Address:**

PO BOX 16307  
WEST PALM BEACH, FL 33416

**New Mailing Address:**

FEI Number: 20-2187236      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

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

**Name and Address of New Registered Agent:**

TORRES, MAGDALENO R  
6317 CYPRESS LN  
LANTANA, FL 33462      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: \_\_\_\_\_ Date: 04/15/2009  
Electronic Signature of Registered Agent

**OFFICERS AND DIRECTORS:**

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

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

**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:

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: MAGDALENO RUBEN TORRES      REV.      04/15/2009  
Electronic Signature of Signing Officer or Director      Date