2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000868

FILED Jul 06, 2006 Secretary of State

Entity Name: MINISTERIO RADIAL CRISTIANO DE SEBRING, INC.

	Principal Place of Business:	New Princ	cipal Place of Business:
	EWOOD BLVD , FL 33870		
Current Mailing Address:		New Mailing Address:	
	EWOOD BLVD , FL 33870		
n accordar	r: 20-2309223 FEI Number Applied For() FEI I nce with s. 607.193(2)(b), F.S., the corporation did not received Address of Current Registered Agent:		
51 SOUT	LIFFORD M III TH COMMERCE AVE , FL 33870 US		
	e named entity submits this statement for the purpos e of Florida.	e of changing	its registered office or registered agent, or both
SIGNATU	RE:		
	Electronic Signature of Registered Agent		Date
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	
Title: Name: Nddress: Dity-St-Zip:	PD () Delete MARTINEZ, JORGE 2218 PINEWOOD BLVD SEBRING, FL 33870	Title: Name: Address: City-St-Zip:	() Change () Addition
itle: lame: address: city-St-Zip:	VD () Delete RAMOS, TITO 1511 FALCON AVENUE SEBRING, FL 33872	Title: Name: Address: City-St-Zip:	() Change () Addition
lame: .ddress: city-St-Zip: itle: lame: .ddress:	RAMOS, TITO 1511 FALCON AVENUE	Name: Address:	D (X) Change () Addition VALENTIN, JOSEPH 2411 FLAMINGO DRIVE
lame: .ddress: .ity-St-Zip: .itle: .lame: .ddress: .ity-St-Zip: .itle: .lame: .ddress:	RAMOS, TITO 1511 FALCON AVENUE SEBRING, FL 33872 SD () Delete VALENTIN, JOSEPH 2411 FLAMINGO DRIVE	Name: Address: City-St-Zip: Title: Name: Address:	D (X) Change () Addition VALENTIN, JOSEPH 2411 FLAMINGO DRIVE
lame: .ddress:	RAMOS, TITO 1511 FALCON AVENUE SEBRING, FL 33872 SD () Delete VALENTIN, JOSEPH 2411 FLAMINGO DRIVE SEBRING, FL 33870 TD () Delete MAYOL, MELBA 2218 PINEWOOD BLVD	Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	D (X) Change () Addition VALENTIN, JOSEPH 2411 FLAMINGO DRIVE SEBRING, FL 33870

I hereby certify that the information supplied with this filing does not qualify for the 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: JORGE J. MARTINEZ PD 07/06/2006