

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jun 04, 2007 8:00 am**  
**Secretary of State**

06-04-2007 90012 015 \*\*\*\*70.00

**DOCUMENT # N05000001354**

1. Entity Name  
**MINISTERIO VINO NUEVO INC**



Principal Place of Business  
**690 NORTH DIXIE HIGHWAY  
HOLLYWOOD, FL 33020 US**

Mailing Address  
**421 NORTHWEST 4TH STREET  
MIAMI, FL 33128 US**

2. Principal Place of Business - No P.O. Box #  
**690 N. Dixie Highway**

3. Mailing Address  
**421 N.W. 4th Street**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

05072007 Chg-NP CR2E037 (12/06)

City & State  
**Hollywood, FL**

City & State  
**Miami, FL**

4. FEI Number  
**NOT APPLICABLE**

Applied For  
**Not Applicable**

Zip  
**33020**

Country  
**United States**

Zip  
**33128**

Country  
**United States**

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**RIVERA, BERNARDO J  
421 NORTHWEST 4TH STREET  
MIAMI, FL 33128**

**7. Name and Address of New Registered Agent**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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 re-registering)

DATE

**Filing Fee is \$61.25  
Due by September 14, 2007**

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**

TITLE **P** ☐ Delete  
NAME **RIVERA, BERNARDO**  
STREET ADDRESS **1450 NE 151 STREET #102**  
CITY-ST-ZIP **NORTH MIAMI, FL 33162**

TITLE **VP** ☐ Delete  
NAME **VAZQUEZ, WILMARIE**  
STREET ADDRESS **1720 CLEVELAND STREET #104E**  
CITY-ST-ZIP **HOLLYWOOD, FL 33020**

TITLE **S** ☐ Delete  
NAME **COLON, SARA**  
STREET ADDRESS **1618 N DIXIE HIGHWAY #5**  
CITY-ST-ZIP **HOLLYWOOD, FL 33020**

TITLE **T** ☐ Delete  
NAME **ROSARIO, JESSICA**  
STREET ADDRESS **1720 CLEVELAND STREET SUITE 205**  
CITY-ST-ZIP **HOLLYWOOD, FL 33020**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10**

TITLE **President** ☒ Change ☐ Addition

NAME **Rivera, Bernardo**  
STREET ADDRESS **421 N.W. 4th Street** **Miami, FL 33128**

TITLE **VP** ☒ Change ☐ Addition

NAME **Vazquez, Wilmarie**  
STREET ADDRESS **6428 Dewey Street** **Hollywood, FL 33023**

TITLE ☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME

STREET ADDRESS

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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Bernardo Rivera**

**5/15/07**

Date

Daytime Phone #

**(786)**

**234-2802**