

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000005103

FILED
Apr 06, 2009
Secretary of State

Entity Name: MINISTERIOS TRANSFORMADORES GLOBALES,INC

Current Principal Place of Business:

1068 W PAUL BONO DR
E201
NOGALES, AZ 85621 US

New Principal Place of Business:

1068 W PAUL BOND DR
E201
NOGALES, AZ 85621 US

Current Mailing Address:

P.O. BOX 6205
NOGALES, AZ 85628

New Mailing Address:

FEI Number: 54-2173491

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.
13302 WINDING OAKS BLVD
A100
TAMPA BAY, FL 33612 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MAROQUIN, LUIS F
Address: 389 E PATAGONIA HWY
City-St-Zip: NOGALES, AZ 85621

Title: TD () Delete
Name: MAROQUIN, CORINA C
Address: 389 E PATAGONIA HWY
City-St-Zip: NOGALES, AZ 85621

Title: SV () Delete
Name: ESPINAL, EDWIN
Address: 389 E PATAGONIA HWY
City-St-Zip: NOGALES, AZ 85621

Title: C () Delete
Name: SALAZAR, JOSE
Address: 389 E PATAGONIA HWY
City-St-Zip: NOGALES, AZ 85621

Title: M () Delete
Name: TAPIA, BLAS
Address: 389 E PATAGONIA HWY
City-St-Zip: NOGALES, AZ 85621

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:

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: EDWIN ESPINAL

SV

04/06/2009

Electronic Signature of Signing Officer or Director

Date