

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 04, 2009
Secretary of State**

DOCUMENT# N05000005243

Entity Name: MINISTERIO INTERNACIONAL LUZ DEL MUNDO INC.

Current Principal Place of Business:

14982 SW 71 ST
MIAMI, FL 33193

New Principal Place of Business:

Current Mailing Address:

14982 SW 71 ST
MIAMI, FL 33193

New Mailing Address:

FEI Number: 20-2870678 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORALES, MIREYA
14982 SW 71 ST
MIAMI, FL 33193 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: MORALES, MIREYA
Address: 14982 SW 71 ST
City-St-Zip: MIAMI, FL 33193

Title: V () Delete
Name: MORALES, MARIO
Address: 14982 SW 71 ST
City-St-Zip: MIAMI, FL 33193

Title: T () Delete
Name: CASTRO, EMILCE
Address: 14982 SW 71 ST
City-St-Zip: MIAMI, FL 33193

Title: S () Delete
Name: GARCIA, JAMESSINE
Address: 220 NW 107 AVENUE, #101
City-St-Zip: MIAMI, FL 33172

Title: D () Delete
Name: GARCIA, JAIME M
Address: 14982 SW 71 ST
City-St-Zip: MIAMI, FL 33193

Title: D () Delete
Name: FERNANDEZ, NORA ELENA
Address: 14982 SW 71 ST
City-St-Zip: MIAMI, FL 33193

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
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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: NORA FERNANDEZ

D

03/04/2009

Electronic Signature of Signing Officer or Director

_____ Date