

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000005274

FILED  
Jun 05, 2007  
Secretary of State

Entity Name: MINISTERIO "TROMPETA DE SION" INC.

## Current Principal Place of Business:

2956 CROSLY DR EAST  
APT D  
WEST PALM BEACH, FL 33415

## Current Mailing Address:

2956 CROSLY DR.EAST  
APT D  
WEST PALM BEACH, FL 33415

## New Principal Place of Business:

2807 ASHLEY DR W  
APT G  
WEST PALM BEACH, FL 33415

## New Mailing Address:

2807 ASHLEY DR W  
APT G  
WEST PALM BEACH, FL 33415

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

ALICEA, LUZ E  
2956 CROSLY DR.EAST  
APT D  
WEST PALM BEACH, FL 33415 US

## Name and Address of New Registered Agent:

ALICEA, LUZ E  
2807 ASHLEY DR W  
APT G  
WEST PALM BEACH, FL 33415 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: LUZ E ALICEA

06/05/2007

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: ALICEA, LUZ E  
Address: 2956 CROSLY DR. EAST APT D  
City-St-Zip: WEST PALM BEACH, FL 33415

Title: S ( ) Delete  
Name: BECERRA, DORIS M  
Address: 3913 CHEROKEE AVE.  
City-St-Zip: WEST PALM BEACH, FL 33409

Title: T ( ) Delete  
Name: ZEGARRA, YOLANDA  
Address: 2807 ASHLEY DR W #G  
City-St-Zip: WEST PALM BEACH, FL 33415

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: ALICEA, LUZ E  
Address: 2807 ASHLEY DR W APT G  
City-St-Zip: WEST PALM BEACH, FL 33415

Title: S (X) Change ( ) Addition  
Name: ALICEA, NORBERT  
Address: 2807 ASHLEY DR W APT G  
City-St-Zip: WEST PALM BEACH, FL 33415

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: LUZ E ALICEA

DP

06/05/2007

Electronic Signature of Signing Officer or Director

Date