2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006383

Jul 22, 2008 Secretary of State

Entity Name: THE KING'S MINISTRIES INTERNATIONAL/MINISTERIOS DEL REY INTERNACIONAL INC

Current Principal Place of Business: New Principal Place of Business: 11301 N. OLA DR. TAMPA, FL 33612 **Current Mailing Address: New Mailing Address:** 11301 N. OLA DR TAMPA, FL 33612 FFI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired () 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: Name and Address of New Registered Agent: DE JESUS, DAISY 14702 LIVINGSTON AVENUE APT 215 LUTZ, FL 33559 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete CAPDEVILA, LUIS A. REV. Name: Name: 11301 N. OLA DR. Address: Address: City-St-Zip: TAMPA, FL 33612 City-St-Zip: Title: () Delete Title: () Change () Addition GONZALEZ, PEDRO M. REV. Name: Name: Address: 6616 N. CAMERON AVE. Address: City-St-Zip: TAMPA, FL 33614 City-St-Zip: Title: () Delete Title: () Change () Addition CAPDEVILA, ANITA REV. Name: Name: Address: 11301 N. OLA DR. Address: City-St-Zip: TAMPA, FL 33612 City-St-Zip: Title: DP () Delete Title: () Change () Addition Name: ALVITOS, HECTOR REV. Name: 7202 FINE POINT CIR., BLD. 8, STE. 108 Address: Address: City-St-Zip: TAMPA, FL 33634 City-St-Zip: Title: DV () Delete Title: () Change () Addition ALVAREZ, MANUEL REV. Name: Name: 7520 N. CLARK AVE. Address: Address: City-St-Zip: TAMPA, FL 33614 City-St-Zip: Title: () Delete Title: () Change () Addition DE JESUS, DAISY Name: Name: Address: 14702 LIVINGSTON AVENUE APT 215 Address: LUTZ, FL 33559 City-St-Zip: 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: REV. LUIS A CAPDEVILA DC 07/22/2008