

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008103

FILED  
Jan 29, 2006  
Secretary of State

**Entity Name:** MINISTERIO CRISTIANO DANDO VIDA, INC.

**Current Principal Place of Business:**

1101 W DR MARTIN LUTHER KING JR BLVD  
SEFFNER, FL 33584 US

**New Principal Place of Business:**

3330 SKYVIEW DRIVE  
LAKELAND, FL 33801 US

**Current Mailing Address:**

P.O. BOX 3356  
BRANDON, FL 33509 US

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

TORRES, JORGE L  
1910 BERRY LAKE DRIVE  
BRANDON, FL 33510 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: FELICIANO, LUIS A  
Address: 2113 IRISE CT APT 205  
City-St-Zip: ORLANDO, FL 32807 US

Title: ST ( ) Delete  
Name: TORRES, JORGE L  
Address: 1910 BERRY LAKE DRIVE  
City-St-Zip: BRANDON, FL 33801 US

Title: O ( ) Delete  
Name: CLAUDIO, RAMON  
Address: 1104 BARTON ROAD APT D-39  
City-St-Zip: SEFFNER, FL 33584 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ST (X) Change ( ) Addition  
Name: TORRES, JORGE L  
Address: 1910 BERRY LAKE DRIVE  
City-St-Zip: BRANDON, FL 33510 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JORGE L TORRES

ST

01/29/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date