## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000008103

**FILED** Apr 15, 2008 Secretary of State

Entity Name: MINISTERIO CRISTIANO DANDO VIDA, INC.

**Current Principal Place of Business: New Principal Place of Business:** 3330 SKYVIEW DRIVE LAKELAND, FL 33801 US **Current Mailing Address: New Mailing Address:** P.O. BOX 1702 LAKELAND, FL 33802 US FEI Number: 14-1946534 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: TORRES, JORGE L 1910 BERRY LAKE DRIVE BRANDON, FL 33510 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: (X) Change ( ) Addition () Delete FELICIANO, LUIS A FELICIANO, LUIS A Name: Name: 5550 E MICHIGAN ST UNIT 3225 Address: 17909 CADENCE STREET Address: City-St-Zip: ORLANDO, FL 32822 US City-St-Zip: ORLANDO, FL 32820 US (X) Change ( ) Addition Title: () Delete Title: Name: TORRES, JORGE Name: TORRES, JORGE L Address: 1910 BERRY LAKE DRIVE Address: 1910 BERRY LAKE DRIVE City-St-Zip: BRANDON, FL 33510 US City-St-Zip: BRANDON, FL 33510 US Title: () Delete Title: (X) Change ( ) Addition CLAUDIO, RAMON Name: CLAUDIO, RAMON Name: 1104 BARTON ROAD APT D-39 1104 BARTON ROAD APT D-39 Address: Address: City-St-Zip: SEFFNER, FL 33584 US City-St-Zip: LAKELAND, FL 33801 US Title: ( ) Delete Title: (X) Change ( ) Addition Name: FELICIANO-PEREIRA, MADELINE Name: PEREIRA, MADELINE 230 TERRANOVA BLVD 4917 OAKWAY DRIVE Address: Address: City-St-Zip: WINTER HAVEN, FL 33884 City-St-Zip: SAINT CLOUD, FL 34771 US Title: () Delete Title: ( ) Change (X) Addition FIGUEROA, RAQUEL M Name: Name: 1006 LEXINGTON STREET Address: Address: City-St-Zip: City-St-Zip: LAKELAND, FL 33801 US

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: JORGE L TORRES D 04/15/2008