

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010525

FILED
Mar 10, 2008
Secretary of State

Entity Name: MINISTERIO ENTRE NOSOTRAS, INC.

Current Principal Place of Business:

4000 NE 168 ST.
PH-2
NORTH MIAMI BEACH, FL 33160

New Principal Place of Business:

Current Mailing Address:

4000 NE 168 ST
PH-2
NORTH MIAMI BEACH, FL 33160

New Mailing Address:

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

Name and Address of Current Registered Agent:

VALEDON, BLANCA D
4000 NE 168 ST.
PH-2
NORTH MIAMI BEACH, FL 33160 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: VALEDON, BLANCA D
Address: 4000 NE 168 ST., PH-2
City-St-Zip: NORTH MIAMI BEACH, FL 33160

Title: D () Delete
Name: GARCIA, MICHELLE M
Address: 4702 SW 160TH AVE., # 328
City-St-Zip: MIRAMAR, FL 33027

Title: SEC () Delete
Name: VALEDON, DORIS Y
Address: 4602 SW 160 TH AVE., # 533
City-St-Zip: MIRAMAR, FL 33027

Title: TRES () Delete
Name: PEREZ, LAURA S
Address: 9185 OLD ORCHARD RD.
City-St-Zip: DAVIE, FL 33328

Title: VP () Delete
Name: RODRIGUEZ, CARMEN E
Address: 903 CHERBOURG WAY
City-St-Zip: KISSIMMEE, FL 34759

Title: D () Delete
Name: ALVAREZ, NILSA R
Address: 5013 SW 92 TERRACE
City-St-Zip: COOPER CITY, FL 33328

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
Name:
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: BLANCA D. VALEDON

PD

03/10/2008

Electronic Signature of Signing Officer or Director

Date