

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011945

FILED  
Apr 28, 2006  
Secretary of State

Entity Name: MINISTERIO INTERNACIONAL CASA DE LIBERACION CORPORATION, INC.

**Current Principal Place of Business:**

15529 SW 99 TERRACE  
MIAMI, FL 33196

**New Principal Place of Business:**

**Current Mailing Address:**

15529 SW 99 TERRACE  
MIAMI, FL 33196

**New Mailing Address:**

FEI Number: 20-4025150      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

CASTANEDA, EUSEBIA S  
7555 SW 152 AVE APT 315  
MIAMI, FL 33193 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: OVIEDO, ORLANDO  
Address: 15529 SW 99 TERRACE  
City-St-Zip: MIAMI, FL 33196

Title: V ( ) Delete  
Name: PAVON, WILFREDO R  
Address: 19615 SW 127 CT  
City-St-Zip: MIAMI, FL 33177

Title: S ( ) Delete  
Name: PEREZ, MAGDA  
Address: 10855 SW 156 TERR  
City-St-Zip: MIAMI, FL 33157

Title: T ( ) Delete  
Name: MILLAN, EVELYN  
Address: 7555 SW 152 AVE APT 315  
City-St-Zip: MIAMI, FL 33193

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

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

Title: V (X) Change ( ) Addition  
Name: OVIEDO, MANUEL  
Address: 15529 SW 99 TERRACE  
City-St-Zip: MIAMI, FL 33196

Title: S (X) Change ( ) Addition  
Name: PESTANA, DAISY  
Address: 16144 SW 55 TERRACE  
City-St-Zip: MIAMI, FL 33185

Title: T (X) Change ( ) Addition  
Name: OVIEDO, EVELYN  
Address: 15529 SW 99 TERRACE  
City-St-Zip: MIAMI, FL 33196

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: /S/ DAISY PESTANA

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04/28/2006

Electronic Signature of Signing Officer or Director

Date