

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000001477

FILED
Apr 03, 2008
Secretary of State

Entity Name: MINISTERIO FAMILIA DE REY INC.

Current Principal Place of Business:

899 GOLD COAST DRIVE
DELTONA, FL 32725

New Principal Place of Business:

Current Mailing Address:

899 GOLD COAST DRIVE
DELTONA, FL 32725

New Mailing Address:

FEI Number: 16-1748729

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

RODRIGUEZ, JOSUE A
899 GOLD COAST DRIVE
DELTONA, FL 32725 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: PTD () Delete
Name: RODRIGUEZ, JOSUE A
Address: 899 GOLD COAST DRIVE
City-St-Zip: DELTONA, FL 32725

Title: VPD () Delete
Name: RODRIGUEZ, JOSE A
Address: 899 GOLD COAST DRIVE
City-St-Zip: DELTONA, FL 32725

Title: DS () Delete
Name: RODRIGUEZ, MARITZA A
Address: 899 GOLD COAST DRIVE
City-St-Zip: DELTONA, FL 32725

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: RODRIGUEZ, MARITZA A
Address: 899 GOLD COAST DRIVE
City-St-Zip: DELTONA, FL 32725

Title: S () Change (X) Addition
Name: CRUZ, JACQUELINE
Address: 1839 ODHAM DR.
City-St-Zip: DELTONA, FL 32738

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: JOSUE RODRIGUEZ

PTD

04/03/2008

Electronic Signature of Signing Officer or Director

Date