

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000007668

FILED  
Jul 21, 2007  
Secretary of State

**Entity Name:** MINISTERIO DE LIBERACION "CINCEL DE HIERRO" INC.

**Current Principal Place of Business:**

5912 ANTILLA DRIVE  
ORLANDO, FL 32809

**New Principal Place of Business:**

**Current Mailing Address:**

5912 ANTILLA DRIVE  
ORLANDO, FL 32809

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

DE LEON, JOHANNISS M EVANG  
5912 ANTILLA DRIVE  
ORLANDO, FL 32809 US

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: DE LEON, JOHANNISS M EVANG  
Address: 5912 ANTILLA DRIVE  
City-St-Zip: ORLANDO, FL 32809

Title: SEC ( ) Delete  
Name: RUIZ, DEBORAH  
Address: 194 HIDDEN SPRINGS CIRCLE  
City-St-Zip: KISSIMEE, FL 34743

Title: TES ( ) Delete  
Name: MINGUELA, JOEL  
Address: 8331 PORT LANCASHIRE DRIVE  
City-St-Zip: ORLANDO, FL 32829

Title: RES ( ) Delete  
Name: LEBRON, PEDRO JR  
Address: 9918 PEDDLERS WAY  
City-St-Zip: ORLANDO, FL 32817

Title: SUP ( ) Delete  
Name: ORTEGA, WANDA  
Address: 5232 LAVAL DRIVE  
City-St-Zip: ORLANDO, FL 32839

Title: SUP ( ) Delete  
Name: DE LEON, DANIEL A  
Address: 6712 LONGMEADE LANE  
City-St-Zip: ORLANDO, FL 32822

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

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

Title: SEC (X) Change ( ) Addition  
Name: DE LEON, MILAGROS  
Address: 5912 ANTILLA DRIVE  
City-St-Zip: ORLANDO, FL 32809

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: JOHANNISS M DE LEON

P

07/21/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date