

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000010085

FILED
Jun 18, 2008
Secretary of State

Entity Name: ASOCIACION DE MUJERES EVANGELICAS EN MIAMI CORP.

Current Principal Place of Business:

2434 SW 26 LANE
MIAMI, FL 33133

New Principal Place of Business:

Current Mailing Address:

2434 SW 26 LANE
MIAMI, FL 33133

New Mailing Address:

FEI Number: 20-5728031 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
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:

RAMOS, CONCEPCION
2434 SW 26 LANE
MIAMI, FL 33133 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: RAMOS, CONCEPCION
Address: 2434 SW 26 LANE
City-St-Zip: MIAMI, FL 33133

Title: VP () Delete
Name: AJA, ROSY
Address: 2365 NW 3 ST
City-St-Zip: MIAMI, FL 33125

Title: SEC () Delete
Name: FERNANDEZ, OLGA
Address: 2310 SW 89 CT
City-St-Zip: MIAMI, FL 33155

Title: T () Delete
Name: MORIN, TIBISAY
Address: 2519 NW 99 AVE
City-St-Zip: CORAL SPRINGS, FL 33065

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:

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: CONCEPCION RAMOS

P

06/18/2008

Electronic Signature of Signing Officer or Director

Date