

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012026

FILED  
Apr 28, 2009  
Secretary of State

Entity Name: MINISTERIO EMMANUEL, INC.

## Current Principal Place of Business:

3715 LOCKRIDGE DRIVE  
LAND O LAKES, FL 34638

## New Principal Place of Business:

## Current Mailing Address:

3715 LOCKRIDGE DRIVE  
LAND O LAKES, FL 34638

## New Mailing Address:

FEI Number: 20-5912881

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RAMIREZ, PORFIRIA  
3308 W. PAXTON AVENUE  
TAMPA, FL 33611 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: TORRES, NYDIA  
Address: 3715 LOCKRIDGE DR.  
City-St-Zip: LAND O LAKES, FL 34638

Title: VPD ( ) Delete  
Name: RODRIGUEZ, ALBERTO  
Address: 3715 LOCKRIDGE DR  
City-St-Zip: LAND O' LAKES, FL 34638

Title: S,T ( ) Delete  
Name: RAMIREZ, PORFIRIA  
Address: 3308 W. PAXTON AVE.  
City-St-Zip: TAMPA, FL 33611

Title: D ( ) Delete  
Name: RAMIREZ, FERDINAND  
Address: 3308 W. PAXTON AVE.  
City-St-Zip: TAMPA, FL 33611

Title: D ( ) Delete  
Name: RAMIREZ, PORFIRIA  
Address: 3308 W. PAXTON AVE.  
City-St-Zip: TAMPA, FL 33611

Title: D ( ) Delete  
Name: TORRES, NYDIA  
Address: 3715 LOCKRIDGE DR.  
City-St-Zip: LAND O LAKES, FL 34638

## 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: ALBERTO RODRIGUEZ

VP

04/28/2009

Electronic Signature of Signing Officer or Director

Date