

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000000954

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** MINISTERIO INTERNACIONAL HECHOS APOSTOLICOS, INC.

**Current Principal Place of Business:**

1922 A EVANS AVE  
FORT MYERS, FL 33901

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 51566  
FORT MYERS, FL 33994

**New Mailing Address:**

**FEI Number:** 06-1802542

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PARRA, WILLIAM  
1007 NW 6TH PL  
CAPE CORAL, FL 33993 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:** D  
**Name:** PARRA, WILLIAM  
**Address:** 1007 NW 6TH PL  
**City-St-Zip:** CAPE CORAL, FL 33993

**Title:** S  
**Name:** PARRA, RUBIELA S  
**Address:** 1007 NW 6TH PL  
**City-St-Zip:** CAPE CORAL, FL 33993

**Title:** T  
**Name:** PARRA, SANDRA L  
**Address:** 1007 NW 6TH PLACE  
**City-St-Zip:** CAPE CORAL, FL 33993

I hereby 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 all other like empowered.

**SIGNATURE:** WILLIAM PARRA

SR

04/30/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date