

**2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Nov 28, 2008**  
**Secretary of State**

DOCUMENT# N07000005488

**Entity Name:** MISSION CENTER " RIVER OF LIFE " INC.**Current Principal Place of Business:**1938 ALLEN ST.  
ENGLEWOOD, FL 34223**New Principal Place of Business:**4916 BONITA RD  
VENICE, FL 34293**Current Mailing Address:**1938 ALLEN ST.  
ENGLEWOOD, FL 34223**New Mailing Address:**4916 BONITA RD  
VENICE, FL 34293**FEI Number:** 26-0331175**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**BARILSKIY, NIKOLAY V  
1938 ALLEN ST.  
ENGLEWOOD, FL, FL 34223 US**Name and Address of New Registered Agent:**NIKOLAEVA, ELENA K  
4916 BONITA RD  
VENICE, FL 34293 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: NIKOLAEVA ELENA

11/28/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:****Title:** VP ( ) Delete  
**Name:** VINNITSKIY, VIKTOR I  
**Address:** 4916 BONITA RD  
**City-St-Zip:** VENICE, FL 34293 US**Title:** S ( ) Delete  
**Name:** NIKOLAEVA, ELENA K  
**Address:** 4916 BONITA RD  
**City-St-Zip:** VENICE, FL 34293 US**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** P (X) Change ( ) Addition  
**Name:** VINNITSKIY, VIKTOR I  
**Address:** 4916 BONITA RD  
**City-St-Zip:** VENICE, FL 34293 US**Title:** VP (X) Change ( ) Addition  
**Name:** MIRONENKO, VLADIMIR A  
**Address:** 4147 GREEN TREE AVE.  
**City-St-Zip:** SARASOTA, FL 34233 US

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: VINNITSKIY VIKTOR

P

11/28/2008

Electronic Signature of Signing Officer or Director

Date