

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000006884

FILED
Apr 12, 2009
Secretary of State

Entity Name: MINISTERIO HAZ DE LUZ INTERNACIONAL, INC.

Current Principal Place of Business:

5051 WEST OAKLAND PARK BOULEVARD
E-112
LAUDERDALE LAKE, FL 33313

New Principal Place of Business:

Current Mailing Address:

5051 WEST OAKLAND PARK BOULEVARD
E-112
LAUDERDALE LAKE, FL 33313

New Mailing Address:

FEI Number: 39-2058038 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

VALIDO, AIDA M
5051 WEST OAKLAND PARK BOULEVARD
E-112
LAUDERDALE LAKE, FL 33313 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: VALIDO, AIDA M
Address: 5051 WEST OAKLAND PARK BOULEVARD APT E112
City-St-Zip: LAUDERDALE LAKE, FL 33313

Title: VP () Delete
Name: MONTES, ABIUD
Address: 905 SW 22ND. AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: ST () Delete
Name: MONTES, LOIDA
Address: 8481 SPRINGTREE DRIVE, APT # 101B
City-St-Zip: SUNRISE, FL 333516103

Title: D () Delete
Name: RAMIREZ, YUBELKA
Address: 30331 SW 153RD. AVENUE
City-St-Zip: HOMESTEAD, FL 33033

Title: D () Delete
Name: ROSA, MIGUEL JR.
Address: 330 NW 14TH. STREET
City-St-Zip: POMPANO BEACH, FL 33060

Title: D () Delete
Name: LECLERC, ABIUD
Address: RR03 BUZON 11259
City-St-Zip: ANASCO, PR 00610

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
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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: MIGUEL ROSA

MR

04/12/2009

Electronic Signature of Signing Officer or Director

Date