## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N07000011161

FILED Jan 12, 2009 Secretary of State

Entity Name: NEW LIFE MINISTRIES NORTH OF CHRISTIAN LIFE MISSION, INC.

Current Principal Place of Business: New Principal Place of Business:

14357 SW 139 CT 2674 WEST 84 STREET MIAMI, FL 33186 HIALEAH, FL 33016

Current Mailing Address: New Mailing Address:

14357 SW 139 CT 2674 WEST 84 STREET MIAMI, FL 33186 HIALEAH, FL 33016

FEI Number: 26-1430445 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

FIGUEREDO, RIGOBERTO

14357 SW 139 CT

MIAMI, FL 33186 US

FIGUEREDO, RIGOBERTO
2674 WEST 84 STREET
HIALEAH, FL 33016 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: RIGOBERTO FIGUEREDO 01/12/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD () Delete
 Title:
 PD (X) Change () Addition

 Name:
 FIGUEREDO, RIGOBERTO
 Name:
 FIGUEREDO, RIGOBERTO

 Address:
 14357 SW 139 CT
 Address:
 2674 WEST 84 STREET

 City-St-Zip:
 MIAMI, FL 33186
 City-St-Zip:
 HIALEAH, FL 33016

Title: VD () Delete Title: () Change () Addition

 Name:
 ACOSTA, LEONARDO
 Name:

 Address:
 14357 SW 139 CT
 Address:

 City-St-Zip:
 MIAMI, FL 33186
 City-St-Zip:

Title: TD () Delete Title: () Change () Addition

 Name:
 ACOSTA, JAVIER
 Name:

 Address:
 14357 SW 139 CT
 Address:

 City-St-Zip:
 MIAMI, FL 33186
 City-St-Zip:

Title: SD () Delete Title: () Change () Addition

 Name:
 DIEGUEZ, MARLO
 Name:

 Address:
 14357 SW 139 CT
 Address:

 City-St-Zip:
 MIAMI, FL 33186
 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: MARLO DIEGUEZ SD 01/12/2009