

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000008489

FILED  
Mar 11, 2009  
Secretary of State

Entity Name: MINISTERIO LA NUEVA VIDA, CORP.

**Current Principal Place of Business:**

12914 SW 202 ST  
MIAMI, FL 33177

**New Principal Place of Business:**

**Current Mailing Address:**

12914 SW 202 ST  
MIAMI, FL 33177

**New Mailing Address:**

FEI Number: 26-3482962

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BELLO, ALBA C  
12914 SW 202 ST  
MIAMI, FL 33177 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: BELLO, ALBA C  
Address: 12914 SW 202 STREET  
City-St-Zip: MIAMI, FL 33177

Title: V ( ) Delete  
Name: RODRIGUEZ, EDUARDO  
Address: 10413 OLD CUTLER ROAD #203  
City-St-Zip: MIAMI, FL 33190

Title: T ( ) Delete  
Name: CORREA, KEYLA  
Address: 10413 OLD CUTLER ROAD #203  
City-St-Zip: MIAMI, FL 33190

Title: S ( ) Delete  
Name: PEREZ, AURORA  
Address: 12914 SW 202 ST  
City-St-Zip: MIAMI, FL 33177

Title: D ( ) Delete  
Name: GONZALEZ, ALAIN  
Address: 12914 SW 202 ST  
City-St-Zip: MIAMI, FL 33177

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: V (X) Change ( ) Addition  
Name: PEREZ, RIGOBERTO  
Address: 12914 SW 202 STREET  
City-St-Zip: MIAMI, FL 33177

Title: T (X) Change ( ) Addition  
Name: VELASCO, TANIA  
Address: 12914 SW 202 STREET  
City-St-Zip: MIAMI, FL 33177

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: ALBA C BELLO

PRES

03/11/2009

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

\_\_\_\_\_  
Date