

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000008062

**FILED**  
**Apr 24, 2010**  
**Secretary of State**

**Entity Name:** MINISTERIO INTERNACIONAL TORRE FUERTE CASA DE RESTAURACION, INC.

**Current Principal Place of Business:**

287 SOUTH KROME AVENUE  
HOMESTEAD, FL 33030

**New Principal Place of Business:**

137 NORTH KROME AVENUE  
HOMESTEAD, FL 33030

**Current Mailing Address:**

287 SOUTH KROME AVENUE  
HOMESTEAD, FL 33030

**New Mailing Address:**

137 NORTH KROME AVENUE  
HOMESTEAD, FL 33030

**FEI Number:** 27-0798680

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SOLIS, IGOR  
287 SOUTH KROME AVENUE  
HOMESTEAD, FL 33030 US

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

SOLIS, IGOR  
137 NORTH KROME AVENUE  
HOMESTEAD, FL 33030 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: \_\_\_\_\_

Electronic Signature of Registered Agent

04/24/2010

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: SOLIS, IGOR PASTOR  
Address: 10852 SW 245TH ST  
City-St-Zip: MIAMI, FL 33032

Title: DS  
Name: SOLIS, FIORDALISA  
Address: 10852 SW 245TH ST  
City-St-Zip: MIAMI, FL 33032

Title: DVP  
Name: PRADO, MARLON  
Address: 23148 SW 113TH AVENUE  
City-St-Zip: MIAMI, FL 33170

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: IGOR SOLIS

PD

04/24/2010

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

\_\_\_\_\_  
Date