

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000007563

FILED  
Mar 30, 2012  
Secretary of State

**Entity Name:** MINISTERIO DE FE Y AVIVAMIENTO EBENEZER, INC.

**Current Principal Place of Business:**

420 JANN AVE STE 2  
OPA LOCKA, FL 33054

**New Principal Place of Business:**

2530 NW 162 TERRACE  
OPA LOCKA, FL 33054

**Current Mailing Address:**

420 JANN AVE STE 2  
OPA LOCKA, FL 33054

**New Mailing Address:**

2530 NW 162 TERRACE  
OPA LOCKA, FL 33054

**FEI Number:** 27-3294127

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MELENDEZ, MICHAEL  
MELENDEZ VEGA LLC  
10511 N KENDALL DR STE C203  
MIAMI, FL 33176 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: DP  
Name: CASTILLO, AIDA  
Address: 2530 NW 162 TERRACE  
City-St-Zip: OPA LOCKA, FL 33054

Title: DT  
Name: FORTUNATO, MIGUEL L  
Address: 2294 NW 136 TERRACE  
City-St-Zip: OPA LOCKA, FL 33054

Title: DS  
Name: SIXTO, PEREZ  
Address: 2530 NW 162 TERRACE  
City-St-Zip: OPA LOCKA, FL 33054

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:** AIDA CASTILLO

DP

03/30/2012

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

\_\_\_\_\_  
Date