

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 19, 2004 8:00 am
Secretary of State

02-19-2004 90010 039 ****66.25

DOCUMENT # N14273

1. Entity Name

MINISTERIO LA SENDA ANTIGUA CORP.



Principal Place of Business

4341 NORTHWEST 167TH ST.
 CAROL CITY FL 33055-4310

Mailing Address

4341 NORTHWEST 167TH ST.
 CAROL CITY FL 33055-4310

34008212



MOORE CR2E037 (11/03)

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-2668606

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CARRASQUILLO, ANGEL L
195 N.W. 72ND ST.
MIAMI FL 33150

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE: PD
 NAME: CARRASQUILLO, ANGEL L Delete
 STREET ADDRESS: 195 N.W. 72 ST.
 CITY-ST-ZIP: MIAMI FL 33150

TITLE: SD
 NAME: CARRASQUILLO, ESTHER Delete
 STREET ADDRESS: 195 N.W. 72 ST.
 CITY-ST-ZIP: MIAMI FL 33150

TITLE: TD
 NAME: COLON, LUIS Delete
 STREET ADDRESS: 10050 S.W. 41ST TERRACE
 CITY-ST-ZIP: MIAMI FL 33165

TITLE: D
 NAME: CEDENO, VICTOR Delete
 STREET ADDRESS: 180 SEAMONS STREET
 CITY-ST-ZIP: OPA LOCKA FL 33054

TITLE: D
 NAME: MEDERO, JESUS Delete
 STREET ADDRESS: 16824 N.W. 44TH AVENUE
 CITY-ST-ZIP: OPA LOCKA FL 33055

TITLE: Delete
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: Change Addition
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

TITLE: Change Addition
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

TITLE: Change Addition
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

TITLE: Change Addition
 NAME: **ANGEL L. Carrasquillo Jr.**
 STREET ADDRESS: **3310 S.W. 40 ST.**
 CITY-ST-ZIP: **Hollywood, FL 33023**

TITLE: Change Addition
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

TITLE: Change Addition
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Rev. Angel L. Carrasquillo Jr. SR
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/4/04
 Date

(305) 758-7700
 Daytime Phone #