

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

TITLE D ☐ Delete
NAME MEDERO, JESUS
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 D ☐ Change ☐ Addition
NAME ANGEL L. CARRASQUILLO
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/4/04

(305) 758-7700

Date

Daytime Phone #