

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 16, 2006
Secretary of State**

DOCUMENT# N29951

Entity Name: MINISTERIOS CAMINO NUEVO, INC.

Current Principal Place of Business:

% VICTOR B. GARCIA C.
6790 SW 12 ST
MIAMI, FL 33144

New Principal Place of Business:

Current Mailing Address:

4952 S.W. 136 PL
MIAMI, FL 33175

New Mailing Address:

FEI Number: 65-0140526 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GARCIA, VICTOR B PD
4952 S.W. 136 PL
MIAMI, FL 33175 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: PD () Delete
Name: GARCIA, VICTOR B
Address: 4952 SW 136TH PLACE
City-St-Zip: MIAMI, FL 33175 US

Title: D () Delete
Name: PEREZ, RENE
Address: 158 N.E. 41 ST #5
City-St-Zip: MIAMI, FL 33137 US

Title: D () Delete
Name: ALVAREZ, CARLOS
Address: 2722 N.W. 2ND AVE.
City-St-Zip: MIAMI, FL 33127 US

Title: D () Delete
Name: JUAREZ, SILVIO D
Address: 7834 W 34 LANE #201
City-St-Zip: HIALEAH, FL 33016

Title: D () Delete
Name: FUENTES, ROGELIO
Address: 11446 NW 91 CT
City-St-Zip: HIALEAH GARDENS, FL 33016

Title: TD () Delete
Name: HERRERA, EMILIO A
Address: 13707 SW KENDALL LAKES CIR #116
City-St-Zip: MIAMI, FL 33183

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: PEREZ, RENE
Address: 4915 SW 137 COURT
City-St-Zip: MIAMI, FL 33175 US

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

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

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 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: VICTOR B GARCIA

PD

04/16/2006

Electronic Signature of Signing Officer or Director

Date