

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N40127

FILED
Apr 29, 2009
Secretary of State

Entity Name: MINISTRY OF HELP AND EVANGELISM "CHRIST LOVES YOU", INCORPORATED

Current Principal Place of Business:

17920 NW 44TH AVE.
MIAMI GARDENS, FL 33055 US

New Principal Place of Business:

Current Mailing Address:

17920 NW 44TH AVE.
MIAMI GARDENS, FL 33055 US

New Mailing Address:

FEI Number: 65-0343193 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CARDONA, ANA C PRES
17920 NW 44TH AVE
MIAMI GARDENS, FL 33055 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: PRES () Delete
Name: CARDONA, ANA C PRES
Address: 17920 NW 44TH AVE
City-St-Zip: MIAMI, FL 33055

Title: VPRES () Delete
Name: ALICANO, CARMEN VPRES
Address: 261 NE 163 STREET
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: VPRES () Delete
Name: RIVERA, LETICIA VPRES
Address: 8800 NW 33 AVENUE RD
City-St-Zip: MIAMI, FL 33147

Title: TRE () Delete
Name: CARDONA, ELIEZER TREASU
Address: 17920 NW 44 AVENUE
City-St-Zip: MIAMI GARDENS, FL 33055

Title: SEC () Delete
Name: RUBIO, AMARILIS SEC
Address: 3521 W 1ST AVENUE
City-St-Zip: HIALEAH, FL 33012

Title: D () Delete
Name: CHAMES, ESTHER DIR
Address: 1035 SE 8TH AVE
City-St-Zip: HIALEAH, FL 33010

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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
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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 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: ANA C. CARDONA

PRES

04/29/2009

Electronic Signature of Signing Officer or Director

Date