

**2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Dec 07, 2006**  
**Secretary of State**

DOCUMENT# N42044

**Entity Name:** MINISTERIO EVANGELISTICO PALABRA DE VIDA, INC.**Current Principal Place of Business:**4293 KENT AVE  
LAKE WORTH, FL 33461 US**New Principal Place of Business:**4446 CARVER ST  
LAKE WORTH, FL 33461 US**Current Mailing Address:**4293 KENT AVE  
LAKE WORTH, FL 33461 US**New Mailing Address:**P.O.BOX 5695  
LAKE WORTH, FL 33466 US**FEI Number:** 65-0243407**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**HERNANDEZ, VICTOR C.  
4293 KENT AVE  
LAKE WORTH, FL 33461 US**Name and Address of New Registered Agent:**HERNANDEZ, VICTOR C.  
6294 18TH STREET SOUTH  
WEST PALM BEACH, FL 33415 US

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:

12/07/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: HERNANDEZ, VICTOR C  
Address: 4293 KENT AVE  
City-St-Zip: LAKE WORTH, FL 33461 US

Title: DS ( ) Delete  
Name: HERNANDEZ, CARIDAD M  
Address: 4293 KENT AVE  
City-St-Zip: LAKE WORTH, FL 33461 US

Title: DV ( ) Delete  
Name: MARTINEZ, PEDRO  
Address: 1416 NW AVE G  
City-St-Zip: BELLE GLADE, FL 33430

Title: DT ( ) Delete  
Name: MARTINEZ, ANNA B  
Address: 1416 NW AVE G  
City-St-Zip: BELLE GLADE, FL 33430

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP (X) Change ( ) Addition  
Name: HERNANDEZ, VICTOR C  
Address: 6294 18TH STREET SOUTH  
City-St-Zip: WEST PALM BEACH, FL 33415 US

Title: DS (X) Change ( ) Addition  
Name: HERNANDEZ, CARIDAD M  
Address: 6294 18TH STREET SOUTH  
City-St-Zip: WEST PALM BEACH, FL 33415 US

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 C HERNANDEZ

DP

12/07/2006

Electronic Signature of Signing Officer or Director

Date