

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000001160

Entity Name: MINISTERIOS NUEVA VISION, INC.

FILED
Jul 07, 2004
Secretary of State

Current Principal Place of Business:

921 EAST 47TH ST.
HIALEAH, FL 33013

New Principal Place of Business:

Current Mailing Address:

921 EAST 47TH ST.
HIALEAH, FL 33013

New Mailing Address:

FEI Number: 65-0016143

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BELARMINIO, MARTINEZ
90 NE 68TH ST
MIAMI, FL 33138 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: BELARMINIO, MARTINEZ
Address: 90 NE 68TH ST
City-St-Zip: MIAMI, FL

Title: SD () Delete
Name: CARO, VANESSA
Address: 17900 NW 2 PL
City-St-Zip: MIAMI, FL 33169

Title: TD () Delete
Name: CORNIEL, CYNTHIA
Address: 921 E. 47 ST
City-St-Zip: NORTH MIAMI BEACH, FL

Title: DM () Delete
Name: MOYA, SAMUEL
Address: 10440 NW 29 COURT
City-St-Zip: MIAMI, FL 33147

Title: D () Delete
Name: CORNIEL, AUGUSTO
Address: 2840 NW 22 CT
City-St-Zip: MIAMI, FL 33142

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
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 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 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: CYNTHIA C CORNIEL

TD

07/07/2004

Electronic Signature of Signing Officer or Director

Date