## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N93000001160

Entity Name: MINISTERIOS NUEVA VISION, INC.

FILED Apr 30, 2008 Secretary of State

Current Principal Place of Business:

921 EAST 47TH ST.
HIALEAH, FL 33013

Current Mailing Address:

New Principal Place of Business:

New Principal Place of Business:

921 EAST 47TH ST. HIALEAH, FL 33013

FEI Number: 90-0213587 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BELARMINIO, MARTINEZ 921 EAST 47 STREET HIALEAH, FL 33013 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:

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Change () Addition () Delete BELARMINIO, MARTINEZ Name: Name: 931 NORTHWEST 140TH STREET Address: Address: City-St-Zip: MIAMI, FL 33168 City-St-Zip: Title: () Delete Title: () Change () Addition MARTINEZ, DORCAS Name: Name: Address: 931 NW 140 ST. Address: City-St-Zip: MIAMI, FL 33168 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition OGUENDO, ROSA Name: OQUENDO, ROSA Name: 1910 NW 134 ST. Address: Address: 1910 NW 134 ST. City-St-Zip: MIAMI, FL 33167 City-St-Zip: MIAMI, FL 33167 Title: CDM ( ) Delete Title: () Change () Addition Name: MOYA, SAMUEL Name:

 Name:
 MOYA, SAMUEL
 Name:

 Address:
 10440 NW 29 COURT
 Address:

 City-St-Zip:
 MIAMI, FL 33147
 City-St-Zip:

Title: S () Delete Title: () Change () Addition

 Name:
 RAMIREZ, MIRTHA
 Name:

 Address:
 6350 LAKE PATRICIA DRIVE, E-11
 Address:

 City-St-Zip:
 MIAMI LAKES, FL 33014
 City-St-Zip:

Title: D ( ) Delete Title: D (X) Change ( ) Addition

 Name:
 HEETOR, MELENDEZ
 Name:
 HECTOR, MELENDEZ

 Address:
 10601 NW 17AVE. #121-A
 Address:
 10601 NW 17AVE. #121-A

 City-St-Zip:
 MIAMI BEACH, FL 33139
 City-St-Zip:
 MIAMI BEACH, FL 33139

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: BELARMINIO MARTINEZ PD 04/30/2008