## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N94000001328

FILED Jan 07, 2009 Secretary of State

Entity Name: MINISTERIO MISION MARANATHA, ASSEMBLIES OF GOD, INC.

**Current Principal Place of Business: New Principal Place of Business:** 6802 PALM RIVER ROAD TAMPA, FL 33619 **Current Mailing Address: New Mailing Address:** 6802 PALM RIVER ROAD TAMPA, FL 33619 FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ROSADO, JOSE 11017 RISING MIST BLVD RIVERVIEW, FL 33569 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: (X) Change ( ) Addition () Delete GONZALES, MILAGRO GONZALES, MILAGRO Name: Name: 529 S CRESCENT AVE Address: 112 INWOOD CIRCLE Address: City-St-Zip: BRANDON, FL 33511 City-St-Zip: BRANDON, FL 33510 Title: ( ) Delete Title: () Change () Addition PINA, BENIGNO Name: Name: Address: 3111 W LA SALLE STREET Address: City-St-Zip: TAMPA, FL 33610 City-St-Zip: Title: () Delete Title: () Change () Addition PEREZ, VICTOR Name: Name: 2018 WAIKIA WAY Address: Address: City-St-Zip: TAMPA, FL 33619 City-St-Zip: Title: TR ( ) Delete Title: () Change () Addition MORA, NORMA Name: Name: 704 FLAMETREE ROAD Address: Address: City-St-Zip: TAMPA, FL 33619 City-St-Zip: Title: () Delete Title: () Change () Addition FELICIANO, RAMON Name: Name: 5475 SAGEMONT DR. Address: Address: City-St-Zip: BRANDON, FL 33511 City-St-Zip: Title: () Delete Title: () Change () Addition AVILES, JUAN Name: Name: Address: 7706 GRAYMOSS LANE Address: TAMPA, FL 33619 City-St-Zip: 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: LUZ MILAGROS GONZALES TSR 01/07/2009