

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 06, 2006 8:00 am
Secretary of State

04-06-2006 90023 021 ****61.25

DOCUMENT # N94000002644

1. Entity Name

MINISTERIO TRIGO NUEVO, INC.



Principal Place of Business

1855 W 60 ST. #345
HIALEAH FL 33012

Mailing Address

1855 W 60 ST. #345
HIALEAH FL 33012

2. Principal Place of Business

3301 OAK STREET

Suite, Apt. #, etc.

3. Mailing Address

3938 Pembroke Pines Cir.

Suite, Apt. #, etc.

City & State

Kissimmee, Florida

Zip
34744

Country
U.S.A.

City & State

Saint Cloud, Florida

Zip
34769

Country
U.S.A.

4. FEI Number

65-0487211

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MACADAM, SAMUEL REV
1855 W 60TH STREET
#345
HIALEAH FL 33012

7. Name and Address of New Registered Agent

Name Rev. Samuel Mac Adam

Street Address (P.O. Box Number is Not Acceptable)

3938 Pembroke Pines Circle

Saint Cloud

City

34769

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD
NAME MACADAM, SAMUEL REV
STREET ADDRESS 1855 W 60TH STREET, #345
CITY-ST-ZIP HIALEAH FL 33012 ☐ Delete

TITLE TD
NAME MATOS, NURY
STREET ADDRESS 3701 JACKSON STREET, APT 406
CITY-ST-ZIP HOLLYWOOD FL 33021 ☒ Delete

TITLE SD
NAME LOPEZ, ANGEL
STREET ADDRESS 1355 SW 6TH STREET, #11
CITY-ST-ZIP MIAMI FL 33135 ☒ Delete

TITLE D
NAME ILIN, MARIO REV
STREET ADDRESS 836 SUPERIOR STREET
CITY-ST-ZIP OPA LOCKA FL 33055 ☐ Delete

TITLE D
NAME VAZQUEZ, LIGIA
STREET ADDRESS 2401 S OCAEN DRIVE, # 502
CITY-ST-ZIP HOLLYWOOD FL 33129 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE SECRETARY-TREASURY
NAME OLGA MARLANO
STREET ADDRESS 5921 SUNSET CANYON DRIVE
CITY-ST-ZIP KISSIMMEE, FL 34758 ☐ Change ☒ Addition

TITLE Director
NAME JOSE R. ESCOBAR
STREET ADDRESS 5921 SUNSET CANYON DRIVE
CITY-ST-ZIP KISSIMMEE, FL 34758 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Rev. Samuel Mac Adam

3/21/06 (407) 957-4153

Date

Daytime Phone #