

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2004 8:00 am
Secretary of State

04-26-2004 91132 001 ****61.25
04-26-2004 91132 002 *****8.75

DOCUMENT # N94000002700 1. Entity Name MINISTERIO INTERNACIONAL JESUCRISTO ES EL SENOR, INC.					
Principal Place of Business 9740 C SW 24TH STREET MIAMI, FL 33165 US			Mailing Address 9740 C SW 24TH STREET MIAMI, FL 33165 US		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 65-0495162	
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent SANTAMARIA, JOSE R REV. 7360 S.W. 24TH STREET, #8 MIAMI, FL 33155			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City		
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 _____ DATE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renewing)		
Filing Fee is \$61.25 Due by May 1, 2004		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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE PD	☐ Delete		TITLE P.D.	☒ Change ☐ Addition	
NAME PORRAS B., JORGE L.	STREET ADDRESS 7360 S.W. 24TH STREET, #8		NAME Porras B. Jorge L.	STREET ADDRESS 9740 "C" S.W. 24ST	
CITY-ST-ZIP MIAMI, FL 33155			CITY-ST-ZIP MIAMI FL 33165		
TITLE VDP	☐ Delete		TITLE VDP	☒ Change ☐ Addition	
NAME SANTAMARIA, JOSE R	STREET ADDRESS 7360 S.W. 24TH STREET, #8		NAME Santamaria Jose R.	STREET ADDRESS 9740 "C" S.W. 24ST	
CITY-ST-ZIP MIAMI, FL 33155			CITY-ST-ZIP MIAMI FL 33165		
TITLE D	☐ Delete		TITLE D	☒ Change ☐ Addition	
NAME SANTAMARIA, PAOLA	STREET ADDRESS 7360 S.W. 24TH STREET, #8		NAME Santamaria Paola	STREET ADDRESS 9740 "C" S.W. 24ST	
CITY-ST-ZIP MIAMI, FL 33155			CITY-ST-ZIP MIAMI FL 33165		
TITLE TSD	☐ Delete		TITLE TSD	☒ Change ☐ Addition	
NAME LINERO, LEONOR T	STREET ADDRESS 7360 S.W. 24TH STREET, #8		NAME Linero Leonor T.	STREET ADDRESS 9740 "C" S.W. 24ST	
CITY-ST-ZIP MIAMI, FL 33155			CITY-ST-ZIP MIAMI FL 33165		
TITLE M	☐ Delete		TITLE M	☒ Change ☐ Addition	
NAME Laguardia gilberto	STREET ADDRESS 9740 "C" S.W. 24ST		NAME Laguardia gilberto	STREET ADDRESS 9740 "C" S.W. 24ST	
CITY-ST-ZIP MIAMI FL 33165			CITY-ST-ZIP MIAMI FL 33165		
TITLE M	☐ Delete		TITLE M	☐ Change ☐ Addition	
NAME Laguardia gilberto	STREET ADDRESS 9740 "C" S.W. 24ST		NAME Laguardia gilberto	STREET ADDRESS 9740 "C" S.W. 24ST	
CITY-ST-ZIP MIAMI FL 33165			CITY-ST-ZIP MIAMI FL 33165		
12. I hereby certify that the information supplied with this filing does not qualify 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 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: <i>Jose R. Santamaria</i> SIGNATURE AND TYPED OR PRINTED NAME OF FILING OFFICER OR DIRECTOR					
Date _____ Daytime Phone # _____					