

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000006042

FILED
Apr 02, 2004
Secretary of State

Entity Name: MINISTERIO DE ENSEÑANZA LA VERDAD DEL EVANGELIO, INC.

Current Principal Place of Business:

11955 S.W. 26 TERR.
MIAMI, FL 33175

New Principal Place of Business:

Current Mailing Address:

11955 S.W. 26 TERR.
MIAMI, FL 33175

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIAZ, MARIA
11955 S.W. 26 TERR.
MIAMI, FL 33175

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: DP () Delete
Name: DIAZ, MARIA
Address: 11955 S.W. 26 TERR.
City-St-Zip: MIAMI, FL 33175

Title: SD () Delete
Name: ZAPATA, SONIA
Address: 19301 N.W. 43 COURT
City-St-Zip: CORAL CITY, FL 33055

Title: DT () Delete
Name: ALMINAQUE, ROSA
Address: 11955 SW 26TERR
City-St-Zip: MIAMI, FL 33175

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:

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: MARIA DIAZ

DP

04/02/2004

Electronic Signature of Signing Officer or Director

Date