

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000003909

FILED
Mar 11, 2009
Secretary of State

Entity Name: MINISTERIO ARBOL DE VIDA ASAMBLEAS DE DIOS, INC.

Current Principal Place of Business:

1372 NW 22 AVE.
MIAMI, FL 33125

New Principal Place of Business:

Current Mailing Address:

1372 NW 22 AVE.
MIAMI, FL 33125

New Mailing Address:

FEI Number: 65-0610739

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARRIOS, ARNOLD J
968 N E 80 ST
MIAMI, FL 33138 US

Name and Address of New Registered Agent:

BARRIOS, ARNOLD J
18611 SW 97 PL
MIAMI, FL 33157 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:

03/11/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BARRIOS, ARNOLD J
Address: 968 N E 80 ST
City-St-Zip: MIAMI, FL 33138

Title: S () Delete
Name: ESTRADA, JOSE
Address: 1120 S.W 13 CT
City-St-Zip: MIAMI, FL 33135

Title: T () Delete
Name: MUNIZ, ANTONIA
Address: 4127 NW 23 AVE
City-St-Zip: MIAMI, FL 33142

Title: T () Delete
Name: PEREZ, ALEIDA
Address: 1120 SW 13 CT
City-St-Zip: MIAMI, FL 33135

Title: T () Delete
Name: BALMACEDA, JAIME R
Address: 3232 N.W 19 ST
City-St-Zip: MIAMI, FL 33125

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BARRIOS, ARNOLD J P
Address: 18611 SW 97 PL
City-St-Zip: MIAMI, FL 33157

Title: S (X) Change () Addition
Name: BARRIOS, ROSA M S
Address: 18611 SW 97 PL
City-St-Zip: MIAMI, FL 33157

Title: T (X) Change () Addition
Name: OLIVA, JOAQUIN A T
Address: 834 SW 12 AVE
City-St-Zip: MIAMI, FL 33130

Title: T (X) Change () Addition
Name: IRAHETA, PAULINO T
Address: 4125 SW 107 PLACE
City-St-Zip: MIAMI, FL 33165

Title: T (X) Change () Addition
Name: BALMACEDA, JAIME R T
Address: 3232 N.W 19 ST
City-St-Zip: MIAMI, FL 33125

Title: T () Change (X) Addition
Name: ORTIZ, CRIMILDA C T
Address: 1543 NW 25 AVE
City-St-Zip: MIAMI, FL 33125

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: ARNOLD BARRIOS

P

03/11/2009

Electronic Signature of Signing Officer or Director

Date