

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005709

FILED  
Apr 30, 2011  
Secretary of State

**Entity Name:** MINISTERIO DE METAFISICA UNIVERSAL, INC.

**Current Principal Place of Business:**

19800 S.W. 180 AVE  
#287  
MIAMI, FL 33187 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 830952  
MIAMI, FL 33283 US

**New Mailing Address:**

**FEI Number:** 65-0709258

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SANTIAGO, DARITZA PRESIDE  
19800 SW 180 AVE  
3287  
MIAMI, FL 33187 US

**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:** P  
**Name:** SANTIAGO, DARITZA  
**Address:** 19800 S.W. 180 AVE. #287  
**City-St-Zip:** MIAMI, FL 33187

**Title:** VPT  
**Name:** CARTAGENA, JOSE  
**Address:** 10606 S.W. 69 TERR  
**City-St-Zip:** MIAMI, FL 33173

**Title:** D  
**Name:** FELICIANO, ANGELA M  
**Address:** 10606 S.W. 69 TERR  
**City-St-Zip:** MIAMI, FL 33173

**Title:** D  
**Name:** CARTAGENA, TAINEE  
**Address:** 8000 BAYSHORE CT #110  
**City-St-Zip:** MIAMI, FL 33138

**Title:** ST  
**Name:** NIEVES, JUANA  
**Address:** 8325 S.W. 107 AVE APT D  
**City-St-Zip:** MIAMI, FL 33173

I hereby 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 all other like empowered.

**SIGNATURE:** DARITZA SANTIAGO

PRES

04/30/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date