

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000001436

FILED  
Jan 31, 2009  
Secretary of State

Entity Name: MINISTERIO RIOS DE AGUA VIVA, INC.

## Current Principal Place of Business:

2211 2ND AVENUE NORTH  
LAKE WORTH, FL 33461 US

## New Principal Place of Business:

## Current Mailing Address:

2211 2ND AVENUE NORTH  
LAKE WORTH, FL 33461 US

## New Mailing Address:

FEI Number: 65-0645893      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

SAENZ, CELSO  
1853 BELL LN  
WEST PALM BEACH, FL 33406 US

## Name and Address of New Registered Agent:

SANTOS, NATANAEL  
332 NORTH PALM VILLAS WAY  
PALM SPRINGS, FL 33406 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: NATANAEL SANTOS

01/31/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: S ( ) Delete  
Name: SZYSKO, EUGENIA  
Address: 11658 TURNSTONE DRIVE  
City-St-Zip: WELLINGTON, FL 33414 US

Title: P ( ) Delete  
Name: SAENZ, CELSO  
Address: 1853 BELL LANE  
City-St-Zip: WEST PALM BEACH, FL 33406 US

Title: T ( ) Delete  
Name: PINO, MIRTHA  
Address: 2635 MYRICA RD  
City-St-Zip: WEST PALM BEACH, FL 33406 US

Title: C ( ) Delete  
Name: MOLINA, REBECA  
Address: 433 LOS ALTOS ROAD  
City-St-Zip: PALM SPRINGS, FL 33461 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V (X) Change ( ) Addition  
Name: SAENZ, NORMA  
Address: 1853 BELL LANE  
City-St-Zip: WEST PALM BEACH, FL 33406 US

Title: P (X) Change ( ) Addition  
Name: SANTOS, NATANAEL  
Address: 332 NORTH PALM VILLAS WAY  
City-St-Zip: PALM SPRINGS, FL 33461 US

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 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: NATANAEL SANTOS

P

01/31/2009

Electronic Signature of Signing Officer or Director

Date