2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 01, 2009
Secretary of State

DOCUMENT# N98000001041

Entity Name: RIOS DE AGUA VIVA MINISTERIO, INC.

Current Principal Place of Business:

1330 SE 16 PLACE
CAPE CORAL, FL 33990

New Principal Place of Business:

Current Mailing Address:

1330 SE 16 PLACE
CAPE CORAL, FL 33990

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:

LOPEZ, VICTOR
15861 SADDLEWOOD LANE
CAPE CORAL, FL 33991 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: PD ( ) Delete
Name: LOPEZ, VICTOR
Address: 15861 SADDLEWOOD LANE
City-St-Zip: CAPE CORAL, FL 33991

Title: 2PD ( ) Delete
Name: LOPEZ, MARIANA
Address: 15861 SADDLEWOOD LANE
City-St-Zip: CAPE CORAL, FL 33991

Title: STD ( ) Delete
Name: ESTRADA, CARMEN
Address: 624 SE SANTA BARBARA BLVD
City-St-Zip: CAPE CORAL, FL 33990

Title: STD ( ) Delete
Name: MARINEZ, ANASTACIO
Address: 123 COTILION LN
City-St-Zip: NORTH FORT MYER, FL 33903

Title: STD ( ) Delete
Name: TORRES, ROLANDO
Address: 165 ELAND DR
City-St-Zip: NORTH FORT MYERS, FL 33917

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:

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: VICTOR LOPEZ PD 04/01/2009
Electronic Signature of Signing Officer or Director — Date