

**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Feb 22, 2008  
Secretary of State**

DOCUMENT# N98000002829

Entity Name: MINISTERIOS EVANGELICOS "EL SHADDAI", CORP.

**Current Principal Place of Business:**

1452 WEST FLAGLER  
MIAMI, FL 33135

**New Principal Place of Business:**

4825 N.W. 17TH AVE.  
MIAMI, FL 33142

**Current Mailing Address:**

1452 WEST FLAGLER  
MIAMI, FL 33135

**New Mailing Address:**

4825 N.W. 17TH AVE.  
MIAMI, FL 33142

FEI Number: 65-0835640

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MURALLES, EVERARDO  
2367 S.W  
MIAMI, FL 33135 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: D ( ) Delete  
Name: EVERARDO, MURALLES REV.  
Address: 2367 S.W 10 ST.  
City-St-Zip: MIAMI, FL 33135

Title: VD ( ) Delete  
Name: MURALLES, ERENDIRA  
Address: 2367 S.W 10 ST.  
City-St-Zip: MIAMI, FL 33125

Title: TD ( ) Delete  
Name: GARCIA, JOSE A  
Address: 902 N.W 26 AVE  
City-St-Zip: MIAMI, FL 33125

Title: SD ( ) Delete  
Name: GARCIA, ROSA M  
Address: 902 N.W 26 AVE  
City-St-Zip: MIAMI, FL 33125

**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:

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: EVERARDO MURALLES

RV.

02/22/2008

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

\_\_\_\_\_  
Date