2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005198

FILED Apr 02, 2009 Secretary of State

Entity Name: MINISTERIO DE DIOS CRISTO TE AMA, INC.

Current Principal Place of Business: New Principal Place of Business: 13280 SW 131ST STREET A112 MIAMI, FL 33186 **Current Mailing Address: New Mailing Address:** 13280 SW 131ST STREET 13280 SW 131ST STREET A112 A112 MIAMI, FL 33186 MIAMI, FL 33186 FEI Number: 65-0948956 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ARVIZO, ANTONIO DIRECTO ARVIZO, ANTONIO D 13280 SW 131ST ST 13280 SW 131ST ST A112 MIAMI, FL 33186 US MIAMI, FL 33186 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: ANTONIO ARVIZO 04/02/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete ARVIZO, ANTONIO Name: Name: 13280 SW 131ST ST A112 Address: Address: City-St-Zip: MIAMI, FL 33186 City-St-Zip: Title: Title: () Delete () Change () Addition Name: ARVIZO, ANA Y Name: Address: 13280 SW 131ST ST A112 Address: City-St-Zip: MIAMI, FL 33186 City-St-Zip: Title: () Delete Title: () Change () Addition BRITO, MARIELIN Name: Name: 13280 SW 131ST ST A112 Address: Address: City-St-Zip: MIAMI, FL 33186 City-St-Zip: Title: (X) Delete Title: () Change () Addition Name: ESPINOSA, JOSE D Name: Address: 13280 SW 131ST ST A112 Address: City-St-Zip: MIAMI, FL 33186 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: ANTONIO ARVIZO D 04/02/2009