| 20(| 7 NOT-FOR-PR | OFIT CORPO REPORT (AR) | RATION | For | FILED | | |
|---|--|---|--|---------------------------------------|-------------------------------------|-----------------------------------|--|
| DOCU 1. Entity Nar | MENT # אָפָסַסָּסָסָסָסָפָאָ ^{ne} | 165 ~ | - | | o 22, 2007 ecretary of | State | |
| MINISTE | RIOS KOINONIA (NUEVA V | 'IDA), INC. | | 0 | 2-22-2007 90026 005 | ****66.25 | |
| Principal Plac | ce of Business | Mailing Address | l | | | | |
| 8716 GARDNER RD TAMPA FL 33625 US | | 8716 GARDNER RD TAMPA FL 33625 US | | | | | |
| 2. Principal Place of Business - No P.O. Box # 16062 DANW / EW | | 3. Mailing Address | | | | atte alate atter entiter et fast | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | Ťist M | OORE CR2E037 | (10/06) | |
| TAMPAFL | | City & State | | 4. FEI Number | 59-3593306 | Applied For Not Applicable | |
| Zip 3362 | Country | Zip | Country | 5. Certificate of S | | \$8.75 Additional Fee Required | |
| | 6. Name and Address of Current | Registered Agent | | 7. Name and Ad | dress of New Registered A | • | |
| Name | | | | | | | |
| 880 | RRANO, ISIDRO 09 SHOREHAM DR. MPA FL 33635 | Street Address | | ress (P.O. Box Number is | (P.O. Box Number is Not Acceptable) | | |
| | | | City | | · | Zip Code | |
| 8 'Thè above | e named entity submits this statement f | or the ourpose of changing its | | alistanad agant or both i | FL state of Florida Lam 1 | | |
| SIGNATURE | lions of rogisterod agont. | Land life # applicable. (NOTE | : Registered Agent signature | required when reinstaling) | DATE | | |
| | FILE NOW: FEE IS \$61.25 Due By May 1, 2007 | Trúst Fund C | npaign Financing Contribution. | \$5.00 May Be Added to Fees | Make Check Florida Depart | | |
| 10 . | OFFICERS AND DI | | 11. | ADDITIONS/CHANC | SES TO OFFICERS AND DIF | | |
| NAME Street address | RAMOS, MARIA L 9209 W ROBSON ST | Delete | DTLF NAME STREET ADDRESS | | | Change Addition | |
| CITY-ST-ZIP | TAMPA FL 33615 | | CHY ST-Z#P | | | Change Addition | |
| NAME STREET ADDRESS | SYVESTRE, CLARA M 8509 FOX HALL DR | - Deele | NAME STREET ADORESS | | | | |
| CITY-SI-ZIP | TAMPA FL 33615 | | CITY ST-ZIP | | | | |
| NAME STREET ADDRESS | P SERRANO, ISIDRO 8809 SHOREHAM DR | | TITLE NAME STREET ADDRESS | | | Change Addition | |
| CITY-ST-ZIP | TAMPA FL 33625 | | CHY-ST-ZIP | | | | |
| title Name | A BAEZ, JOSE R | Delete | TITLE NAME | | | Change Addition | |
| STREET ADDRESS CHTY-ST-ZIP | 4134 MY LADY LANE #1 LAND O LAKES FL 34639 | | STREET ADDRESS CITY_ST-ZIP | | | | |
| TITLE NAME STREET ADDRESS CITY - SI - ZIP | | Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | k | | Change Addition | |
| TITLE NAME STREET ADDRESS CTPY-S1-ZIP | | Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | Change Addition | |
| of the col if change | certify that the information supplied wi on this report or supplemental report in poration or the receiver or trustee emi id, or on an attachment with an address | Dowered to execute this repor | t as required by Chap ed. | ter 617, Florida Statules; | and that my name appears i | n Block 10 or Block 11 | |
| SIGNATURE: | | | | | | | |

January 26, 2007

Florida Department of State Secretary of State Division of Corporations P.O. Box 6850 Tallahassee, FL 32314

To whom it may concern:

Please be informed that the administration of the "**Nueva Vida**" **Church**, located at 8716 Gardner Rd, Tampa, FL 33625, has reached the agreement that, from now on, <u>to make any administrative</u> <u>changes</u> or to replace any church officers, i.e. president, secretary, treasurer, or administrator; <u>at least three (3) signatures will be</u> <u>required</u>.

If you have any questions, please feel free to contact us at (813) 264-6052.

Thank you.

Sincerely,

Clara Silvestre Church Treasurer

Maria Ramos Church Secretary