

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006148

FILED
Feb 16, 2006
Secretary of State

Entity Name: MINISTERIOS EL CAMINO, INC.

Current Principal Place of Business:

6790 SW 12TH STREET
MIAMI, FL 33144

New Principal Place of Business:

Current Mailing Address:

1945 S.W. 60TH PLACE
MIAMI, FL 33155

New Mailing Address:

FEI Number: 65-0925976

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GONZALEZ, RODOLFO
1945 S.W. 60TH PLACE
MIAMI, FL 33155 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: P () Delete
Name: LEZCANO, NORMA
Address: 5440 W 21 CT APT 101
City-St-Zip: HIALEAH, FL 33016

Title: VP () Delete
Name: STRAUBE, EDGAR R
Address: 5745 SW 51TH STREET
City-St-Zip: MIAMI, FL 33155

Title: T () Delete
Name: GONZALEZ, RODOLFO
Address: 1945 SW 60TH PLACE
City-St-Zip: MIAMI, FL 33155

Title: D () Delete
Name: JARAMILLO, LUCIANO
Address: 759 NW 106 AVE CIRCLE
City-St-Zip: MIAMI, FL 33172

Title: D () Delete
Name: PADILLA, ORLANDO
Address: 6161 SW 16 TERR
City-St-Zip: MIAMI, FL 33144

Title: D () Delete
Name: AJA, ROSY
Address: 19 SIDONIA AVENUE # 1
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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Name:
Address:
City-St-Zip:

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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 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: EDGAR STRAUBE

VP

02/16/2006

Electronic Signature of Signing Officer or Director

Date