

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000036157

FILED  
May 15, 2007  
Secretary of State

Entity Name: JESUS CRISTO ES LA RESPUESTA, CORP.

## Current Principal Place of Business:

4450 WEST 16 AVE  
419  
HIALEAH, FL 33012

## New Principal Place of Business:

4400 WEST 16 AVE  
529  
HIALEAH, FL 33012

## Current Mailing Address:

4450 WEST 16 AVE  
419  
HIALEAH, FL 33012

## New Mailing Address:

4400 WEST 16 AVE  
529  
HIALEAH, FL 33012

FEI Number: 20-2474474

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BALON, JOSUE  
4450 WEST 16 AVE  
419  
HIALEAH, FL 33012 US

## Name and Address of New Registered Agent:

BALON, JOSUE  
4400 WEST 16 AVE  
529  
HIALEAH, FL 33012 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:

05/15/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: BALON, JOSUE  
Address: 4450 WEST 16 AVE STE 419  
City-St-Zip: HIALEAH, FL 33012

Title: VPD ( ) Delete  
Name: BALON, MARTHA  
Address: 4450 WEST 16 AVE STE 419  
City-St-Zip: HIALEAH, FL 33012

Title: TD (X) Delete  
Name: VAZQUEZ, RICARDO  
Address: 1750 NW 27 AVE STE 708  
City-St-Zip: MIAMI, FL 33125

Title: SD (X) Delete  
Name: BRITO, MARIA  
Address: 1701 WEST 42 PL STE 44  
City-St-Zip: HIALEAH, FL 33012

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: BALON, JOSUE  
Address: 4400 WEST 16 AVE , # 529  
City-St-Zip: HIALEAH, FL 33012

Title: VPD (X) Change ( ) Addition  
Name: BALON, MARTHA  
Address: 4400 WEST 16 AVE, #529  
City-St-Zip: HIALEAH, FL 33012

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSUE BALON

PD

05/15/2007

Electronic Signature of Signing Officer or Director

Date