

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000009394

**FILED**  
**Mar 12, 2013**  
**Secretary of State**  
**CC3994441889**

**Entity Name:** ALBERTO M. DELGADO MINISTRIES INC.

**Current Principal Place of Business:**

12295 SW 93 AVE.  
MIAMI, FL 33176

**Current Mailing Address:**

P.O.BOX 557251  
MIAMI, FL 33255

**FEI Number: 57-1211942**

**Certificate of Status Desired: Yes**

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

DELGADO, ALBERTO M  
12295 SW 93 AVE  
MIAMI, FL 33176 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	DP	Title	DV
Name	DELGADO, ALBERTO M	Name	DELGADO, MARIAM J
Address	12295 SW 93 AVE	Address	12295 SW 93 AVE
City-State-Zip:	MIAMI FL 33176	City-State-Zip:	MIAMI FL 33176

Title	DT
Name	JIVANJEE, ESTHER
Address	12850 SW 47 ST
City-State-Zip:	MIAMI FL 33175

*I hereby 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 all other like empowered.*

**SIGNATURE: ALBERTO DELGADO**

**PRESIDENT**

**03/12/2013**

Electronic Signature of Signing Officer/Director Detail

Date