

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

DOCUMENT# N07000008660

**FILED  
Jun 25, 2013  
Secretary of State  
CC8544294539**

**Entity Name:** THE NEW WAY OF LIFE INSTITUTE, INC.

**Current Principal Place of Business:**

20800 NE 8TH COURT  
104  
MIAMI, FL 33179

**Current Mailing Address:**

20800 NE 8TH COURT  
104  
MIAMI, FL 33179

**FEI Number: 36-4640488**

**Certificate of Status Desired: No**

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

CRUZ, MARY L  
20800 NE 8TH COURT  
104  
MIAMI, FL 33179 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            PRES  
Name            CRUZ, GILBERT M  
Address        PO BOX-813474  
City-State-Zip: HOLLYWOOD FL 33081

Title            VP  
Name            CRUZ, MARY L  
Address        PO BOX-813474  
City-State-Zip: HOLLYWOOD FL 33081

*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: MARY L CRUZ**

**VP**

**06/25/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date