

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000006220

**FILED**  
**Feb 07, 2014**  
**Secretary of State**  
**CC7916695133**

**Entity Name:** MINISTERIO CENTRO CRISTIANO NEFESH INC.

**Current Principal Place of Business:**

2221 FORSYTH RD, UNIT #1A  
ORLANDO, FL 32807

**Current Mailing Address:**

2221 N FORSYTH RD. UNIT 1-A  
ORLANDO, FL 32807 US

**FEI Number:** 27-0430941

**Certificate of Status Desired:** No

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

RIVERA, MARIA I  
2009 CHASE AVE  
SANFORD, FL 32771 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:** MARIA IVETTE RIVERA

02/07/2014

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name CARRASQUILLO, EMILIO PASTOR  
Address 2009 CHASE AVE  
City-State-Zip: SANFORD FL 32771

Title VP  
Name RIVERA, MARIA IVETTE PASTOR  
Address 2009 CHASE AVE  
City-State-Zip: SANFORD FL 32771

Title DC  
Name NEWTON, FRANK  
Address 2009 CHASE AVE  
City-State-Zip: SANFORD FL 32771

Title DC  
Name GARCIA , IRIS  
Address 4801 FORT STEVENS ST. APT 521  
City-State-Zip: ORLANDO FL 32822

Title DS  
Name WRIGHT, MILDRED  
Address 5986 TIVOLI GARDENS BLVD.  
City-State-Zip: ORLANDO FL 32829

Title DC  
Name MUSHA, ERIN  
Address 6301 S WESTSHORE BLVD. #301  
City-State-Zip: TAMPA FL 33616

Title DC  
Name NEVAREZ, JOSE  
Address 1545 KILBEE TRAIL  
City-State-Zip: ORLANDO FL 32825

*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:** MARIA IVETTE RIVERA

PASTOR

02/07/2014

Electronic Signature of Signing Officer/Director Detail

Date