Current Mai	ling Address:			
21374 SW 1 101	12 AV.			
MIAMI, FL	33189			
FEI Number: 47-4876052			Certificate of Status Desired: No	
Name and A	Address of Current Registered Ager	nt:		
SEVERINO, FE				
16932 SW 119 MIAMI, FL 331	СТ			
16932 SW 119 MIAMI, FL 331	СТ	nging its registered office or regis	tered agent, or both, in the State o	f Florida.
16932 SW 119 MIAMI, FL 331 The above named	CT 77 US	nging its registered office or regis	tered agent, or both, in the State o	
16932 SW 119 MIAMI, FL 331 The above named	CT 77 US d entity submits this statement for the purpose of chai	nging its registered office or regis	tered agent, or both, in the State o	
16932 SW 119 MIAMI, FL 331 The above named	CT 77 US d entity submits this statement for the purpose of char E: FELIPE SEVERINO Electronic Signature of Registered Agent	nging its registered office or regis	tered agent, or both, in the State o	03/26/2018
16932 SW 119 MIAMI, FL 331 The above named SIGNATURE Officer/Dire	CT 77 US d entity submits this statement for the purpose of char E: FELIPE SEVERINO Electronic Signature of Registered Agent	nging its registered office or regis	tered agent, or both, in the State o	03/26/2018
16932 SW 119 MIAMI, FL 331 The above named SIGNATURE Officer/Dire Title	CT 77 US d entity submits this statement for the purpose of chan E: FELIPE SEVERINO Electronic Signature of Registered Agent Ctor Detail :			03/26/2018
16932 SW 119 MIAMI, FL 331 The above named SIGNATURE	CT 77 US d entity submits this statement for the purpose of char E: FELIPE SEVERINO Electronic Signature of Registered Agent Ctor Detail : P	Title	VP	03/26/2018

Title

Name

Address

City-State-Zip:

s

SEVERINO, AQUILINA

MIAMI FL 33189

21374 SW 112 AV, APT. 101

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N1500009440

Entity Name: MINISTERIO INTERNATIONAL LAS NUEVAS MARAVILLAS, INC.

Current Principal Place of Business:

21374 SW 112 AV. 101 MIAMI, FL 33189

Title

Name

Address

City-State-Zip:

Т

SEVERINO, CRUSITO

16932 SW 119 CT

MIAMI FL 33177

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: FELIPE SEVERINO

Electronic Signature of Signing Officer/Director Detail

03/26/2018

FILED Mar 26, 2018 Secretary of State CC7311817436