

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N18000002296

**FILED**  
**Feb 26, 2019**  
**Secretary of State**  
**1578465326CC**

**Entity Name:** MINISTERIO APOSTOLICO VIDA ABUNDANTE CORP.

**Current Principal Place of Business:**

8036 SOUTH MADEIRA CT.  
ORLANDO, FL 32836

**Current Mailing Address:**

8036 SOUTH MADEIRA CT.  
ORLANDO, FL 32836 US

**FEI Number: 82-4628109**

**Certificate of Status Desired: Yes**

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

DASILVA, OZEAS L  
8036 SOUTH MADEIRA CT.  
ORLANDO, FL 32836 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           PTD  
Name           DASILVA, OZEAS L  
Address       8036 SOUTH MADEIRA CT.  
City-State-Zip: ORLANDO FL 32836

Title           VPSD  
Name           DASILVA, MARIA Z  
Address       8036 SOUTH MADEIRA CT.  
City-State-Zip: ORLANDO FL 32836

Title           SECRETARY  
Name           AZEVEDO, LIVIA MARCIA SOARES  
Address       2807 BOATING BLVD  
City-State-Zip: KISSIMMEE FL 34746

Title           TREASURER  
Name           MORALES, MARIA REIS  
Address       6161 SPARLING HILLS BLVD  
City-State-Zip: ORLANDO FL 32808

*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: OZEAS L DASILVA**

**PRESIDENT**

**02/26/2019**

Electronic Signature of Signing Officer/Director Detail

Date