

~~PROFIT CORPORATION~~  
ANNUAL REPORT  
**1997**



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

APPROVED AND FILED

97 SEP 15 AM 10:52

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT #** 739660 *NON-PROFIT*  
1. Corporation Name  
*Lakeview United Methodist Church  
Hispanic, Inc.*

Principal Place of Business Mailing Address  
*11500 NW 12 Avenue  
MIAMI, FL 33168*

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip 24 Country 25 29 Zip 30 Country

3. Date Incorporated or Qualified **July 13, 1977** 3a. Date of Last Report  
4. FEI Number *59-1236854* Applied For / Not Applicable  
5. Certificate of Status Desired  \$8.75 Additional Fee Required  
6. Election Campaign Financing / Trust Fund Contribution  \$5.00 May Be Added to Fees  
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No

9. Name and Address of Current Registered Agent  
*FONSECA José Algerico.  
11500 N.W. 12 AVE  
N. MIAMI, FL. 33168.*

10. Name and Address of New Registered Agent  
B1 Name  
B2 Street Address (P.O. Box Number is Not Acceptable)  
B3  
B4 City **FL** B5 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS  
TITLE NAME STREET ADDRESS CITY-ST-ZIP  
P *TAMAYO Angel  
2655 COLLINS AVE APT 2004  
MIAMI, BEACH FL*  
T *ZULON Leticia  
8335 W 18 AVE  
HIALEAH, FL*  
S *José Alberto Borrón  
120 N.E. 121 ST  
North MIAMI - FL.*  
D *Zulón Leticia  
8335 W 18 AVE  
HIALEAH, FL*  
D *Borrón Catalina.  
120 N.E. 121 ST  
North MIAMI, FL*  
D *BORRÓN Leticia  
19414 NW 79 CT  
MIAMI, FL 33015*

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP  
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP  
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP  
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP  
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP  
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP  
*800002295678-5  
-09/17/97--01079--005  
\*\*\*\*\*61.25 \*\*\*\*\*61.25*  
*a. alan  
9/15/97*

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE *[Signature]* *Quinto 20/02 (205) 691-2675*

CR2E034 (4/97)