

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **744831** (9)
1. Corporation Name
FUNDACION MISIONERA REDENCION, INC.



Principal Place of Business: 15611 NW 45 AVENUE, CAROL CITY FL 33056
Mailing Address: 3930 NW 175TH ST., CAROL CITY FL 33056

3. Date Incorporated or Qualified: 11/03/1978
3a. Date of Last Report: 04/26/1995
4. FEI Number: 59-2821510
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 has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business (21) Suite, Apt. #, etc. (22) City & State (23) Zip (24) Country (25)
2a. Mailing Address (26) Suite, Apt. #, etc. (27) City & State (28) Zip (29) Country (30)

9. Name and Address of Current Registered Agent
POLANCO, LUGINIO (REV)
121 N.W. 4TH. AVE.
DANIA, FL. FL 33004

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code **FL**

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	POLANCO, LUGINIO (REV)	
STREET ADDRESS	3930 N.W. 175TH ST.	
CITY-ST-ZIP	CAROL CITY FL 33056	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	RODRIGUEZ, LUCIANO	
STREET ADDRESS	9 ARABIA AVE.	
CITY-ST-ZIP	OPA-LOCKA FL	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	POLANCO, EVA	
STREET ADDRESS	3930 N.W. 175TH ST.	
CITY-ST-ZIP	CAROL CITY FL 33056	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	RODRIGUEZ, EVA	
STREET ADDRESS	9 ARABIA AVE.	
CITY-ST-ZIP	OPA-LOCKA FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	ALAGASTINO, HECTOR	
STREET ADDRESS	4040 N.E.	
CITY-ST-ZIP	POMPANO BEACH FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	ALASASTINO, HERMINIA	
STREET ADDRESS	4040 N.E.	
CITY-ST-ZIP	POMPANO BEACH FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if applicable, on an attachment with an address.

SIGNATURE: *Rev. Luginio Polanco* - *Rev. Luginio Polanco - 5/30/96*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #
PRESIDENT.

CR2E037 (12/95)