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May 13 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # F93000005689 (5)

1. Corporation Name

MINISTERIO EVANGELISTICO: "JESU CRISTO ES EL SENOR" INC.



Principal Place of Business

Mailing Address

14013 TROUVILLE DRIVE
TAMPA FL 33624

14013 TROUVILLE DRIVE
TAMPA FL 33624-6861

3. Date Incorporated or Qualified
12/15/1993

3a. Date of Last Report
04/24/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt #, etc.

26 Suite, Apt #, etc.

22 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

4. FEI Number
95-4047379

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DE LA TORRE, OTTO J DR.
14013 TROUVILLE DRIVE
TAMPA FL 33624

81 Name

82 Street Address (P.O. Box Number Is Not Acceptable)

83

84 City

FL

85 Zip Code

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:

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P DELETE
NAME DE LA TORRE, OTTO J DR.
STREET ADDRESS 14013 TROUVILLE DRIVE
CITY-ST-ZIP TAMPA FL 33624

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE S DELETE
NAME HERNANDEZ, ANGEL M REV.
STREET ADDRESS 6310 SEVILLE AVENUE
CITY-ST-ZIP HUNTINGTON PARK CA 90255

2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE T DELETE
NAME DE LA TORRE, JUAN
STREET ADDRESS 3651 BERKSHIRE ROAD
CITY-ST-ZIP PICO RIVERA CA 90860

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE D DELETE
NAME GARCIA, HUMBERTO
STREET ADDRESS 7803 BAIRNSDALE STREET
CITY-ST-ZIP DOWNEY CA 90240

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE D DELETE
NAME DE LA TORRE, ROSERIO C
STREET ADDRESS 14013 TROUVILLE DRIVE
CITY-ST-ZIP TAMPA FL 33624

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE Change 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 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0048780

Signature OTTO JUAN DE LA TORRE 4-25-97 8139615475

CR2E037 (9/96)