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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M48064

1. Corporation Name
LIBRERIA CRISTIANA INTERAMERICANA INC.



Principal Place of Business
2171 W FLAGLER STREET
MIAMI FL 33135

Mailing Address
2171 W FLAGLER STREET
MIAMI FL 33135

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
03/10/1987

4. FEI Number
59-2783038

Applied For
Not Applicable

2. Principal Place of Business
21 2177 W. Flagler St

2a. Mailing Address
26 2177 W. Flagler St

Suite, Apt. #, etc.
22

Suite, Apt. #, etc.
27

City & State
23 MIAMI

City & State
28 MIAMI

Zip
24 33135

Country
25 USA

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 the current year Intangible Personal Property Tax. Yes No

9. Name and Address of Current Registered Agent
TOIRAC, ALFREDO
2171 W FLAGLER STREET
MIAMI FL 33135

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
2177 W. Flagler ST
83
84 City MIAMI FL 85 Zip Code 33135

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

Table with 12 rows for Officers and Directors. Row 1: TOIRAC, ALFREDO R., 2224 SW 12TH ST, MIAMI FL 33135.

Table with 12 rows for Additions/Changes to Officers and Directors in 12. All rows are empty.

14. I 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, with all other like empowered.

SIGNATURE: Alfredo R. Toirac, Pres. 2/9/99 305-642-1079
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/98)