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**Mar 07 1997 8:00am
Secretary of State**

**NONPROFIT
CORPORATION
ANNUAL REPORT
1997**



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

DOCUMENT # N26641 (3)
1. Corporation Name
INTERNATIONAL DIVINE REALIZATION SOCIETY INC.



Principal Place of Business Mailing Address
**12205 SW 16 TERRACE #A107
MIAMI FL 33175** **12205 SW 16 TERRACE #A107
MIAMI FL 33175-1569**

3. Date Incorporated or Qualified **05/26/1988** 3a. Date of Last Report **02/26/1996**
4. FEI Number **65-0056955** 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 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Country Zip 29 Country 30

9. Name and Address of Current Registered Agent
**LACAYO, DANILO
13225 SW 111TH TERR
#4
MIAMI FL 33186**

10. Name and Address of New Registered Agent
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]* (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	VD	<input type="checkbox"/> DELETE
NAME	RENALD, FLORES	
STREET ADDRESS	430 GOLDEN ISLES DR SUITE 105	
CITY - ST - ZIP	HALLANDALE FL	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	RONALD, FLORES	
STREET ADDRESS	430 GOLDEN ISLES DR, #705	
CITY - ST - ZIP	MIAMI FL	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	LACAYO, DANILO	
STREET ADDRESS	13225 SW 111 TERRACE SUITE 4	
CITY - ST - ZIP	MIAMI FL	
TITLE	F	<input type="checkbox"/> DELETE
NAME	DUARTE, MANUEL	
STREET ADDRESS	16920 SW 110 COURT	
CITY - ST - ZIP	MIAMI FL	
TITLE	T	<input type="checkbox"/> DELETE
NAME	RUIZ, ARGENTINA	
STREET ADDRESS	9035 SW 149TH PLAY	
CITY - ST - ZIP	MIAMI FL	
TITLE	F	<input type="checkbox"/> DELETE
NAME	AYERDIZ, SERGIA	
STREET ADDRESS	8015 SW 134TH CT	
CITY - ST - ZIP	MIAMI FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	RONALD, FLORES	
1.3 STREET ADDRESS	1005 NE 10TH ST # 4	
1.4 CITY - ST - ZIP	HALLANDALE, FL 33009	
2.1 TITLE	SD	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	YVES, BASSET	
2.3 STREET ADDRESS	11050 SW 164TH TERRACE	
2.4 CITY - ST - ZIP	MIAMI, FL	
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	F	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	AYERDIZ, SERGIO	
6.3 STREET ADDRESS	8015 SW 134TH CT	
6.4 CITY - ST - ZIP	MIAMI, FL	

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]* **DANILO LACAYO** Date: **2/23/97** (305) 477-1224 Daytime Phone # **0032918**

CR2E037 (9/96)