

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUN 28 AM 8:56

DOCUMENT # **N94000004254 (8)**

1. Corporation Name
MINISTERIOS DE LA PALABRA DE DIOS EN ECCION, INC

Principal Place of Business Mailing Address
9304 DUBOIS BLVD ORLANDO FL 32825

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 08/30/1994	3a. Date of Last Report 1st Report
4. FEI Number 59-3284277	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status <input checked="" type="checkbox"/>	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business 1840 N. Goldenrod Rd.	2a. Mailing Address 1840 N. Goldenrod Rd.
21. Suite, Apt. #, etc. Orlando, Fla. 32807	26. Suite, Apt. #, etc. Orlando, Fla 32807
22. City & State	27. City & State
23. Zip Country	28. Zip Country
24. Zip Country	29. Zip Country
25. Zip Country	30. Zip Country

9. Name and Address of Current Registered Agent DIAZ, ANGEL 9304 DUBOIS BLVD ORLANDO FL 32825		10. Name and Address of New Registered Agent	
B1 Name Victor M. Diaz	B2 Street Address (P.O. Box Number is Not Acceptable) 1840 N. Goldenrod Rd	B3	B4 City Orlando
B5 Zip Code 32807	FL		

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: *John E. Diaz* 01/19/95 *Victor M. Diaz* 4/4/95
DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PD	NAME DIAZ, ANGEL	11 TITLE RD	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 9304 DUBOIS BLVD	CITY - ST - ZIP ORLANDO FL 32825	12 NAME	no change
TITLE D	NAME DE JESUS, EDITH M	13 STREET ADDRESS	
STREET ADDRESS 9304 DUBOIS BLVD	CITY - ST - ZIP ORLANDO FL 32825	14 CITY - ST - ZIP	
TITLE D	NAME VALLES, JOSEFA	21 TITLE D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 9304 DUBOIS BLVD	CITY - ST - ZIP ORLANDO FL 32825	22 NAME Secretary	
TITLE	NAME	23 STREET ADDRESS Victor M. Diaz 1840 N. Goldenrod Rd.	
TITLE	NAME	24 CITY - ST - ZIP Orlando, Fla 32807	
TITLE	NAME	31 TITLE D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	NAME	32 NAME Treasurer	
TITLE	NAME	33 STREET ADDRESS John E. Diaz 1840 N. Goldenrod Rd	
TITLE	NAME	34 CITY - ST - ZIP Orlando, Fla 32807	
TITLE	NAME	41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	NAME	42 NAME	
TITLE	NAME	43 STREET ADDRESS	
TITLE	NAME	44 CITY - ST - ZIP	
TITLE	NAME	51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	NAME	52 NAME	
TITLE	NAME	53 STREET ADDRESS	
TITLE	NAME	54 CITY - ST - ZIP	
TITLE	NAME	61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	NAME	62 NAME	
TITLE	NAME	63 STREET ADDRESS	
TITLE	NAME	64 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 110.07(3)(h), 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 the report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changing or an attachment with an address.

SIGNATURE: *Angel Diaz* **Angel Diaz** 4-2-95 (407) 384-0212
DATE