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NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # N95000003016 (1)

1. Corporation Name

MINISTERIOS SAR SHALOM INC.



Principal Place of Business

Mailing Address

6830 S.W. 51ST STREET  
MIAMI FL 33155

6830 S.W. 51ST STREET  
MIAMI FL 33155

3. Date Incorporated or Qualified

06/23/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MALDONADO, GUILLERMO  
6830. S.W. 51ST ST.  
MIAMI FL 33155

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

TITLE PD  
NAME MALDONADO, GUILLERMO  
STREET ADDRESS 6830 S.W. 51ST ST.  
CITY-ST-ZIP MIAMI FL 33155

TITLE VD  
NAME MALDONADO, ANA G.  
STREET ADDRESS 6830 S.W. 51ST ST.  
CITY-ST-ZIP MIAMI FL 33155

TITLE Asst. S / D  
NAME DE LA FE, ELODIA  
STREET ADDRESS 6816 S.W. 89TH COURT  
CITY-ST-ZIP MIAMI FL 33173

TITLE S/T/D  
NAME LASZLO, ONDINA  
STREET ADDRESS 2980 S.W. 19TH TERRACE  
CITY-ST-ZIP MIAMI FL 33145

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

PD  
MALDONADO, GUILLERMO  
6830 S.W. 51st Street  
Miami, FL 33155

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

VD  
MALDONADO, ANA G.  
6830 S.W. 51st Street  
Miami, FL 33155

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

Asst. S / D  
DE LA FE, ELODIA  
6816 S.W. 89TH COURT  
MIAMI, FL 33173

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

S/T/D  
LASZLO, ONDINA  
2980 S.W. 19TH TERRACE  
MIAMI, FL 33145

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

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

Change Addition

Change Addition

Change Addition

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 changed, or on an attachment with an address.

SIGNATURE:

Guillermo Maldonado  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/96  
Date

(305) 669-1275  
Daytime Phone #

CR2E037 (12/95)