

FILE NOW: FILING FEE IS \$61.25

**FILED**  
**Jun 16, 1999 8:00 am**  
**Secretary of State**

06-16-1999 90018 016 \*\*\*\*61.25

0039503

NONPROFIT  
 CORPORATION  
 ANNUAL REPORT  
**1999**



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

**DOCUMENT # N97000003719**

1. Corporation Name

**IGLESIA JESUCRISTO VIENE PRONTO, INC.**

Principal Place of Business

210 NE 38 STREET  
 #15  
 FORT LAUDERDALE FL 33334

Mailing Address

210 NE 38 STREET  
 #15  
 FORT LAUDERDALE FL 33334



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip 25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip 29 Country 30

3. Date Incorporated or Qualified

06/27/1997

4. FEI Number

65-0767262

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

9. Name and Address of Current Registered Agent

**RODRIGUEZ, ALBERTO J PASTOR**  
 210 NE 38 STREET  
 #15  
 FORT LAUDERDALE FL 33334

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS  DELETE

TITLE PD  
 NAME RODRIGUEZ, ABLERTO J  
 STREET ADDRESS 210 NE 38 STREET, #215  
 CITY-ST-ZIP FORT LAUDERDALE FL 33334

TITLE V  
 NAME RODRIGUEZ, MARGARITA  
 STREET ADDRESS 210 NE 38 STREET, #215  
 CITY-ST-ZIP FORT LAUDERDALE FL 33334

TITLE D  
 NAME ALVAREX, LORENZA  
 STREET ADDRESS 210 NE 38 STREET, #215  
 CITY-ST-ZIP FORT LAUDERDALE FL 33334

TITLE T  
 NAME POSSE, ANA MARIA  
 STREET ADDRESS 950 LAWERS CIRCLE  
 CITY-ST-ZIP DEL RAY BEACH FL 33044

TITLE S  
 NAME GONZALEZ, NURIS  
 STREET ADDRESS 7541 GRANDVIEW  
 CITY-ST-ZIP MIRAMAR FL 33023

TITLE D  
 NAME GONZALEZ, RADHAMES  
 STREET ADDRESS 7541 GRANDVIEW  
 CITY-ST-ZIP MIRAMAR FL 33023

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

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

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

4.1 TITLE  Change  Addition  
 4.2 NAME ALBERTO GUTIERREZ  
 4.3 STREET ADDRESS 3761 NE 11 AVE Apt. West.  
 4.4 CITY-ST-ZIP OAK PARK FL 33334

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

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

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 617, 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:

*[Signature]*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/99  
 Date

(954) 630-9341  
 Daytime Phone #

CR2E037 (11/98)