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**Apr 13, 1999 8:00 am**  
**Secretary of State**

04-13-1999 90027 022 \*\*\*\*61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999



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

DOCUMENT # N98000004677

1. Corporation Name  
**RADIO CHRIST FOR ALL, INC.**

Principal Place of Business: 5720 SW 17 STREET MIAMI FL 33155  
 Mailing Address: 5720 SW 17 STREET MIAMI FL 33155



2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	08/13/1998
22 City & State	27 City & State	4. FEI Number
23 Zip Country	28 Zip Country	65-0862307
24	29	Applied For
	30	Not Applicable
9. Name and Address of Current Registered Agent		5. Certificate of Status Desired <input type="checkbox"/>
-PEREZ, MARCOS P- -10440 SW 51 STREET- -MIAMI FL 33165-		\$8.75 Additional Fee Required
		6. Election Campaign Financing, Trust Fund Contribution <input type="checkbox"/>
		\$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
-PEREZ, MARCOS P- -10440 SW 51 STREET- -MIAMI FL 33165-		81 Name	Pablo LABO
		82 Street Address (P.O. Box Number is Not Acceptable)	781 WEST 80TH ST.
		83	
		84 City	HIACLEAH FL 85 Zip Code 33014

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: *Pablo Labo* Pablo LABO 04-06-99 DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD SIERRA, JULIO <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	3893 SW 133 PL	1.2 NAME	
STREET ADDRESS	MIAMI FL 33175	1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	SD FERNANDEZ, SILVIA <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	7525 NW 8 ST	2.2 NAME	
STREET ADDRESS	MIAMI FL 33126	2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	VD PEREZ, MARCOS <input checked="" type="checkbox"/> DELETE	3.1 TITLE	Pablo LABO <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	10440 SW 51 ST	3.2 NAME	781 W. 80th St.
STREET ADDRESS	MIAMI FL 33165	3.3 STREET ADDRESS	HIACLEAH, FL 33014
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	TD VERA, JOSE <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	5780 SW 17 ST	4.2 NAME	
STREET ADDRESS	MIAMI FL 33155	4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	D ALFARO, CARLOS <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	11775 SW 134 CT	5.2 NAME	
STREET ADDRESS	MIAMI FL 33186	5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	D JAUREGUI, OBED <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	2480 NW 35 ST	6.2 NAME	
STREET ADDRESS	MIAMI FL 33142	6.3 STREET ADDRESS	
CITY-ST-ZIP		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: *Pablo Labo* SIGNATURE REQUIRED **PRESIDENT** 04-06-99 (305) 266-1045 DATE Daytime Phone #

0032335

CR2E037 (11/198)