

# FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
**1996**



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

DOCUMENT # **N40127** (5)

1. Corporation Name

**MINISTRY OF HELP AND EVANGELISM "CHRIST LOVES YOU", INCORPORATED**



Principal Place of Business

Mailing Address

17920 NW 44TH AVE  
MIAMI FL 33055-3330  
US

PO BOX 172153  
HIALEAH FL 3317-153  
US

3. Date Incorporated or Qualified  
**09/24/1990**

3a. Date of Last Report  
**03/27/1995**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

24 Country

28 Zip

29 Country

4. FEI Number  
**65-0343193**

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CARDONA, ANA C  
17920 NW 44TH AVE  
MIAMI FL**

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PD** ☐ DELETE  
NAME **CARDONA, ANA C**  
STREET ADDRESS **17920 NW 44TH AVE**  
CITY - ST - ZIP **OPA LOCKA FL**

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

TITLE **VD** ☐ DELETE  
NAME **CARDONA, JAIME**  
STREET ADDRESS **17920 NW 44TH AVE**  
CITY - ST - ZIP **OPA LOCKA FL**

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

TITLE **TD** ☐ DELETE  
NAME **CARDONA, ELIEZER**  
STREET ADDRESS **17920 NW 44TH AVE**  
CITY - ST - ZIP **OPA LOCKA FL**

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

TITLE **SD** ☒ DELETE  
NAME **RODRIGUEZ, MARIA D R**  
STREET ADDRESS **7176 SW 12TH ST**  
CITY - ST - ZIP **MIAMI FL**

4.1 TITLE ☒ Change ☐ Addition  
4.2 NAME **THOMAS LUZADIA**  
4.3 STREET ADDRESS **1800 SW 41ST PL**  
4.4 CITY - ST - ZIP **MIAMI FL 33055**

TITLE **D** ☒ DELETE  
NAME **FIVERA, FLOR**  
STREET ADDRESS **2492 W 64TH PLACE**  
CITY - ST - ZIP **HIALEAH FL**

5.1 TITLE ☒ Change ☐ Addition  
5.2 NAME **Perez, Nidia**  
5.3 STREET ADDRESS **2492 W 64TH AVE**  
5.4 CITY - ST - ZIP **MIAMI SPRING FL 33146**

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

6.1 TITLE ☐ Change ☒ Addition  
6.2 NAME **JOSE F. DIANA**  
6.3 STREET ADDRESS **7151 FINEWAY BLVD**  
6.4 CITY - ST - ZIP **MIAMI FL 33023**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)