FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 13 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #
1. Corporation Name

I am an officer or direct

SIGNATURE:

PENTECOSTAL CHURCH THE LIGHT OF THE WORLD

1 61116	ooone ononon me e			•		
Principal Place	of Business	Mailing Address	Mailing Address			HIQI DIBIL BIBIT DIDIT BIBIL DIBIL TIBIL IDDI
1142 N W 19TH ST PO BOX 5692 FT LAUDERDALE FL 33310		1142 N W 19TH ST PO BOX 5692 ET LAUDERDALE EL 3331				
TT EXODERIONE		, , 5,0015/	• • • • • • • • • • • • • • • • • • • •		3. Date incorporated or Qualified 02/11/1975	3a. Date of Last Report 02/27/1996
2. Principal Pl	ace of Business	2a. Mailing Address	2a. Mailing Address		4. FEI Number 65-0054945	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	S8.75 Additional
City & State		City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23 Zıp	Country	28	Count	у	Trust Fund Contribution 8. This corporation has liability for	Added to Fees Intangible tax under s. 199.032,
24	25	29	30		Florida Statutes Yes No 10. Name and Address of New Registered Agent	
	9. Name and Address of Curi	rent Hegistered Agent	8	1 Name	10, Name and Address of New Ke	gistered Agent
	QUENDO		8	2 Street Add	Iress (P.O. Box Number is Not Acceptab	ole)
1	/ 26TH ST. R FL 33023		8	3		
]			8	4 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						
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 it applicable. (NOTE: Registered Agent signature required when reinstating) DATE						
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFIC	
TITLE	D DELETE		1.1 TITLE	ľ		Change Addition
NAME	DEL VALLE, AURELIO		1.2 NAME			
STREET ADDRESS	1206 NW 11TH ST FT LAUDERDALE FL		1.3 STREET ADDRESS 1.4 CITY-ST-ZIP			
CITY-ST-ZIP	PD DELETE		2.1 TITU			☐ Change ☐ Addition
NAME	OQUENDO, JUAN		2.2 NAME			
STREET ADDRESS	6900 S.W. 26TH ST.		2.3 STR			
CITY - ST - ZIP	MIRAMAR FL		2.4 CITY-ST-ZIP			
TITLE			3 1 TITLE		<u> </u>	Change Addition
NAME	NIEVES, LYDIA	•	3.2 NAM	E	ELSA Bonilla	
STREET ADDRESS	2050 SW 61ST AVENUE		3,3 STRE	ET ADDRESS	HIS I NW 16 HOE	-(77) 6
CITY-ST-ZIP	MIRAMAR FL		3.4. CM	-ST-ZIP	It. Kanderdele, +	1, 33309
TITLE	T	L DELETE	4.1 TITLE	ì	•	Change L. Addition
NAME	FIGUEROA, DORIS		4. 2 NAA			
STREET ADDRESS	5108 NW 1ST AVE4			ET ADDRESS		
CITY-ST-ZIP	FT LAUDEREDALE FL	☐ DELETE	4.4 CITY 5.1 TITLE			Change Addition
TITLE NAME			5.1 HILL 5.2 NAM			C charge C Nontroll
STREET ADDRESS				ET ADDRESS	•	
CITY+ST-ZIP			5.4 CITY			
TITLE		DELETE	6.1 T(T)		***************************************	Change Addition
NAME			6.2 NAM	i		••••• •••
STREET ADDRESS				ET ADORESS		
CITY-ST-ZIP			6.4 CITY			
14. I do herel	by certify that the information supp	olied with this filing does not qua	lify for the e	emption state	ed in Section 119.07(3)(i), Florida Statute at my signature shall have the same lega	s. I further certify that the
I am an o	fficer or director of the corporation	or the receiver or trustee empo	wered to ex	ocute this repo	ort as regulred by Chapter 617, Florida S	Statutes; and that my name