FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1997

DOCUMENT # N96000001889

Radio Amor, Poder Y Gracia, Inc.

FILED May 19 1997 8:00am Secretary of State

Principal Place of Business	Mailing Address	·····		4
"	•			
2929 Floyd Street	2929 Flo	•		
Sarasota, FL 34239	Sarasota	, FL 34	239	
	,			3. Date Incorporated or Qualified 3a. Date of Last Report
				April 08, 1996 N/A
2. Principal Place of Business	2a. Mailing Address			4. FEI Number Applied For
1 910 Martin Luther	26 910 Martin	Luther		X Not Applicab
Suite, Apt #, etc King Jr. B		ng Jr.	Blvd.	• 5. Certificate of Status Desired \$8.75 Additional
2	City & State			Fee Required
City & State Tampa, FL	28 Tampa, FL			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip Country	Zip Zip	Country		This corporation has liability for intangible tax under s. 199.032,
4 33603 25 USA	29 33603	30 USA		Florida Statutes Yes Yes No
9. Name and Address of C		1901 034		10. Name and Address of New Registered Agent
Rev. William V. Ra		B1 Na	me p	
*** * * * * * * * * * * * * * * * * * *	Inos	92 6		Registered Corporate Agents, In ess (P.O. Box Number is Not Acceptable)
2929 Floyd Street		62 St		612 S. Greenwood Avenue
Sarasota, FL 34239		63	Y	Z + L O I O I O I O I O I O I O I O I O I O
		 84 Ci	•	Clearwater FL 85 Zip Code 34616
11 Pursuant to the provisions of Sections 61	7,0502 and 617,1508. Florida Statu	tes, the above-na	med corpo	
office or registered agent, or both, in the	State of Florida, Such change was	authorized by the	corporation	oration submits this statement for the purpose of changing its registere ion's board of directors. I hereby accept the appointment as registered
			1	71
SIGNATURE Peggy Sue Hyn Signature typed or printed name of registe	eed agent and title if applicable (NO	TE Registered Admit	nel ve repuired	ad when reinstating) DATE
	S AND DIRECTORS	13. 00	\mathcal{M}	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TIILE P	K DELETE	1.1 TITLE	P	Change 🔲 Addition
Rev. William	V. Ramos	1.2 NAME	Re	ev. Alberto Acosta
STREET ADDRESS 2929 Floyd St	reet	1 3 STREET ADD	ESS 91	10 Martin Lütker King Jr. Blvd.
CHY-SI-ZiP Sarasota, FL		1 4 CITY - ST - ZIF		ampa, FL 33603
TILLE S/T	DELETE	21 TITLE		Change Addition
NAME Elias Ortiz		22 NAME		
STREET ADDRESS 4901 North 19	th Street	23 STREET ADD	RESS	·
City-Si-Zie Tampa, FL 336		2 4 CITY-ST-ZI	,	
TILLE D	K DELETE	3 1 TITLE	D	Change Addition
NAME Rev. Julio Ro	sario. Jr.	3.2 NAME	Ev	va Acosta
STREET ADDRESS P.O. Box 7449		33 STREET ADDI	RESS 91	10 Martin Luther King Jr. Blvd.
CIY-SI-ZIP Tampa, FL 336		3.4. CITY-ST-ZI		ampa, FI 33603
TITLE D	DELETE	4.1 TITLE		Change Addition
NAME Rev. Eugenio	Pagan	4. 2 NAME		
STREET ADDRESS 815 E. Ida St		4.3 STREET ADD	RESS	
Oty-SI-ZIP Tampa, FL 336	03	4.4 CITY - ST - ZIF	,	/M
TIPLE	☐ DELETE	5.1 TITLE		Change Addition
NAME		5.2 NAME		\ \M
STREET ADDRESS		5.3 STREET ADD	RESS	لا
CITY - ST - ZIP		5.4 CITY - ST - ZIF		1
Titet	DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		000002196450 -05/30/9701077027
STREET ADDRESS		6.3 STREET ADD	RESS	***61.25
CITY-ST-70P		6.4 CITY-ST-ZIF	<u> </u>	
14. I do hereby certify that the information so	upplied with this filing does not qua	lify for the exempl	ion stated	in Section 119.07(3)(i), Florida Statutes. I further certify that the my signature shall have the same legal effect as if made under oath; the
Lam an officer or director of the coroora	tion or the receiver or trustee emoo	wered to execute.	this report	my signature shall have the same legal effect as it made under dain; to take required by Chapter 617, Florida Statutes; and that my name
appears in Block 12 or Block 13 if chang	ged, or on an attachmen with an ac	ida sa		<u>.</u>
CIONATURE (VIII)	ald & hand	2		5/13/97 582-54-3962
SIGNATURE: SONATURE AND TO	PED OR PRINTED NAME OF BIGNING OFFICE	H OR DIRECTOR		Date Daytime Phone #
. Grant conte and th				