

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
 AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

(Amendment)
FILED
 98 SEP 21 PM 12:11
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

0006560

NONPROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # 715090 (7)
 1. Corporation Name
SUNSHINE CHRISTIAN CHURCH, INC.

Principal Place of Business Mailing Address

14225 NORTHWEST EIGHTH AVENUE MIAMI FL 33168-6818
 C/O SOUTH DADE CHRISTIAN CHURCH 10950 OUAL ROOST DRIVE MIAMI FL 33157

3. Date Incorporated or Qualified
08/12/1968

4. FEI Number **05-0128508** 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

7. Is this nonprofit corporation a homeowners association? Yes No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 **14225 NW 8 AVE.**

22 City & State 27 **MIAMI, FL.**

23 Zip Country 28 **33168** 29 **Dade** 30

9. Name and Address of Current Registered Agent

ROTH, JEFFREY C ESQ.
 ROTH & SCHOLL
 1500 SAN REMO AVE., STE. 176
 CORAL GABLES FL 33146

10. Name and Address of New Registered Agent

81 Name **FRANCISCO de JESUS**

82 Street Address (P.O. Box Number Is Not Acceptable)
12730 W GOLF DR

83 **MIAMI FL 33167**

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 *Francisco de Jesus* (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		
TITLE	DPC	<input checked="" type="checkbox"/> DELETE
NAME	ALVAREZ, ROLANDO	
STREET ADDRESS	18103 S.W. 88TH PLACE	
CITY-ST-ZIP	MIAMI FL 33157	
TITLE	DVC	<input checked="" type="checkbox"/> DELETE
NAME	CAMPBELL, WES	
STREET ADDRESS	14451 SW 158TH STREET	
CITY-ST-ZIP	MIAMI FL 33177	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	DE JESUS, DAMIAN	
STREET ADDRESS	12730 W. GOLF DRIVE	
CITY-ST-ZIP	MIAMI FL 33177	
TITLE	AS	<input checked="" type="checkbox"/> DELETE
NAME	KINNARD, GENE	
STREET ADDRESS	9040 S.W. 97TH TERR.	
CITY-ST-ZIP	MIAMI FL 33176	
TITLE	T	<input checked="" type="checkbox"/> DELETE
NAME	MARTINEZ, SAMUEL	
STREET ADDRESS	1550 N.E. 124TH ST	
CITY-ST-ZIP	MIAMI FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE	DPC	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	LUIS FRANCISCO MORALES	
1.3 STREET ADDRESS	18211 NW 52 ave	
1.4 CITY-ST-ZIP	MIAMI FL 33055	
2.1 TITLE	DVC	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	DAMIAN de JESUS	
2.3 STREET ADDRESS	12730 W. GOLF DR	
2.4 CITY-ST-ZIP	MIAMI FL 33167	
3.1 TITLE	S.D.	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	FRANCISCO de JESUS	
3.3 STREET ADDRESS	12730 W GOLF DR	
3.4 CITY-ST-ZIP	MIAMI FL 33167	
4.1 TITLE	T	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	WASHINGTON MONTE de OCA	
4.3 STREET ADDRESS	1251 NE 106 ST	
4.4 CITY-ST-ZIP	MIAMI FL 33161	
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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.

SIGNATURE: *Francisco de Jesus* 9-18-98
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (5/98)