## **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 # 703446

(5)

## THE FIRST SPANISH UNITED PRESBYTERIAN CHURCH OF MIAMI, INC.

Principal Place of Business Mailing Address					ı ibuli anılı anılı anılı ilili ilili ilili ilili	ENIA MAMBA OLDEN BAMAN MAMBA MAMAN ANDRE ANDRA
2480 NW 7TH ST 2480 NW 7TH ST						
BOX 3501057 MIAMI FL 33125-3135		BOX 3501057 MIAMI FL 33125-3135				
				3. Date incorporated or Qualified   3a. Date of Last Report		
					01/12/1962	03/14/1996
2. Principal P	lace of Business	2a. Mailing Address	•		4. FEI Number	Applied For
21		26			59-1288361	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
City & State		City & State			Fee Required	
23		28		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip	Country	<del>,                                    </del>	8. This corporation has liability for	
24	25	29	30			Yes No
	9. Name and Address of Curre	nt Registered Agent	· · · · · · · · · · · · · · · · · · ·		10. Name and Address of New Re	gistered Agent
			81	Name		
SOSA, V	VINSTON H		82 Street Addre		dress (P.O. Box Number is Not Acceptate	ole)
2480 NW 7TH ST						
miami fi	L 33125		83			
			84	City		FL 85 Zip Code
11. Pursuant	to the provisions of Sections 617.050	02 and 617.1508. Florida Statut	es, the above	e-named co	rooration submits this statement for the n	
office or r	egistered agent, or both, in the State	e of Florida, Such change was	authorized by	the corpora	rporation submits this statement for the pation's board of directors. I hereby accept	ot the appointment as registered
SIGNATURE		222		111/67	OIL SOSA	1/14/09
SIGNATURE .	Signature, typed or printed name of registered ag	ent and title if applicable (NO)	E: Registered Age	ent signature req	uired when reinstating)	DATE
12.	· · · · · · · · · · · · · · · · · · ·	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	·····
TITLE	D	☐ DELETE	1.1 TITLE			☐ Change ☐ Addition
NAME	CRUZ, RAFAEL		1.2 NAME			
STREET ADDRESS	2850 S.W. 1ST STREET		1.3 STREET			
CITY-ST-ZIP TITLE	MIAMI FL 33135 TD	DELETE	1.4 CITY-5 2.1 TITLE	ST-ZIP		Change Addition
NAME	URGELLES, ARMANDO		2.1 TITLE 2.2 NAME			[] Change [] Audition
STREET ADORESS	5011 NW 4TH TERR		2.3 STREET	AUUDEGG		
CITY-ST-ZIP	MIAMI FL		2.4 CITY-			
TITLE	D	☐ DELETE	3.1 TITLE	31-611		Change Addition
NAME	CABRERA, ROMANA		3.2 NAME			_ • -
STREET ADDRESS	432 S.W. 87 PL.		3.3 STREET	ADDRESS		
CITY-ST-ZIP	MIAMI FL		3 4. CITY-	ST-ZIP		
TITLE	\$	☐ DELETE	4.1 TITLE			☐ Change ☐ Addition
NAME	VUELTA, XIOMARA		4. 2 NAME			
STREET ADDRESS	10170 N.W. 54 TERRACE		4.3 STREET	ADDRESS		
CITY-ST-ZIP	MIAMI FL 33141		4.4 CITY-5	T - ZIP		
TITLE	PD	☐ DELETE	5.1 TITLE			Change Addition
NAME	SOSA, WINSTON H	100	5.2 NAME			
STREET ADDRESS	2625 COLLINS AVENUE, #17	UB	5.3 STREET	ì		
CłTY - ST - ZIP TITLE	MIAMI BEACH FL 33141	DELETE	5.4 CITY - S	T-ZIP		Char Ladan
NAME	d Gutierrez, Carlotica	fill perceit	6.1 TITLE			☐ Change ☐ Addition
STREET ADDRESS	651 N.W. 43 COURT		6.2 NAME	ADODECO		
CITY OF THE	MIAMI EL 22126		6.3 STREET	ALJUME 55		

14. I do 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

1 14 97 305 642 4755 Daily Property Menas

**FILED** 

Jan 22 1997 8:00am

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Secretary of State