FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

SIGNATURE:

2965 S.W. 37 AVE. MIAMI FL 33133



FLORIDA DEPARTMENT OF STATE

FILED

Feb 28 1997 8:00am

Secretary of State

Date

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 718182

(9)

Mailing Address

1820 S.W. 74 AVE. RD. MIAMI FL 33155-1559

THE CHURCH OF GOD SPANISH MISSION, INC.

| U\$ | | US | US | | 3. Date Incorporated or Qualified 04/10/1970 3a. Date of Last Report 02/01/1996 | | | | |
|---|-------------------------------------|-------------------------------------|---------------------|---|---|--------------|--------------|-----------|--|
| 2. Principal Pla | ace of Business | 2a. Mailing Address | 2a. Mailing Address | | 4. FEI Number | - | Ap | plied For | |
| 21 | | 26 | | 23-7293684 | , | | Applicable | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | E Continue of Cintus Desired | Œ | \$8.75 A | dditional | |
| 22 | | 27 | 27 | | 5. Certificate of Status Desired | العارا | Fee Re | | |
| City & State | | City & State | City & State | | 6. Election Campaign Financing | | \$5.00 | May Be | |
| 23 | | 28 | 28 | | Trust Fund Contribution | | Added to | | |
| Zıp | Country | Zip | Country | | 8. This corporation has fiability for it | | | 199.032, | |
| 24 25 29 30 | | | 30 | | Florida Statutes Yes 🗹 No | | | | |
| 9. Name and Address of Current Registered Agent 10, Name and Address of New Registered Agent | | | | | | | | | |
| | | | 81 | Name | | | | | |
| |)A, CAROL | | 82 | 82 Street Address (P.O. Box Number is Not Acceptable) | | | | | |
| 1820 SW | 74TH AVENUE ROAD | | | | | | | | |
| MIAMI, FL. | | | | | | | | | |
| MIAMI FL 33155 | | | | City | | | 85 Zip C | Code | |
| | | | | ······ | | FL | | | |
| 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. | | AND DIRECTORS | 13. | x signature requi | ADDITIONS/CHANGES TO OFFIC | | DIRECTOR | S IN 12 | |
| TITLE | P | DELETE | 1.1 TITLE | | 7,0011101107070717000710 | | Change | Addition | |
| NAME | FIGUEROA,LAZARO | | 1.2 NAME | | | | | | |
| STREET ADDRESS | 1820 S.W. 74 AVE. RD. | | 1.3 STREET ADDRESS | | | | | 1 | |
| CITY-ST-ZIP | A4444 P4 | | 1.4 CITY-ST | | | | | | |
| TITLE | V | ☐ DELETE | 2.1 TITLE | - ZIF | | ı | Change | Addition | |
| NAME | | | 2.2 NAME | | | • | | | |
| STREET ADDRESS | 226 NE 3 ST | | 2.3 STREET ADDRESS | | | | | | |
| | HALLING AD DI | | 2.4 CITY-ST | | | | | | |
| CITY-ST-ZIP TITLE | | | 3.1 TITLE | 1-ZIr | | | Change | Addition | |
| NAME | OID | | 3.2 NAME | | | • | | | |
| STREET ADDRESS | | | 3.3 STREET / | *DUBECC | | | | | |
| CITY-SI-ZIP | MILANA PE | | 3.4. CITY-ST | | | | | | |
| TITLE | | | 4.1 TITLE | 1-211 | | | Change | Addition | |
| NAME | VIO | | 4. 2 NAME | | | • | | | |
| STREET ADDRESS | | | 4.3 STREET A | 2238004 | | | | | |
| CITY-SI-ZIP | a bada ad | | 4.4 CITY-ST | | · · · · · · · · · · · · · · · · · · · | | | | |
| TITLE | D | DELETE | 5.1 TITLE | | · · · · · · · · · · · · · · · · · · · | | Change | Addition | |
| NAME | CARABALLO, BENJAMIN JE | 3 | 5.2 NAME | | | | _ • | | |
| STREET ADDRESS | | | 5.3 STREET A | ADDRESS | | | | | |
| CHY-ST-ZIP | 110111011000 51 | | 5.4 CITY-ST | | | | | | |
| TITLE | HOLETHOODIE | DELETE | 6.1 THTLE | -211 | | 1 | Change | Addition | |
| NAME | | | 6.2 NAME | | | | | | |
| STREET ADDRESS | | | 6.3 STREET | ADDDECC | | | | | |
| | | | | l l | | | | | |
| 14. I do hereb | v certify that the information supp | lied with this filing does not qual | 6.4 CITY-ST | | d in Section 119.07(3)(i), Florida Statutes | s. 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. | | | | | | | | | |