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May 21 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # 726319 (7)  
1. Corporation Name  
CHRISTIAN ANDES MISSION, INC.



Principal Place of Business  
2512 DOUBLETREE ROAD  
SPRING VALLEY CA 91978  
US  
630 Leona Vicario  
Col. Guajardo, Tecate, BC Mexico

Mailing Address  
P.O. BOX 43 3758  
SAN YSIDRO CA 92143-3758  
US

3. Date Incorporated or Qualified  
05/03/1973

4. FEI Number  
23-7366817  
Applied For  
Not Applicable

21. Principal Place of Business  
630 Leona Vicario

26. Mailing Address  
same

5. Certificate of Status Desired  
\$8.75 Additional Fee Required

22. Suite, Apt. #, etc.  
Col. Guajardo

27. Suite, Apt. #, etc.

6. Election Campaign Financing  
Trust Fund Contribution  
\$5.00 May Be Added to Fees

23. City & State  
Tecate, B.C.

28. City & State

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

24. Zip

25. Country  
Mexico

29. Zip

30. Country

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FRIES, JOHN W.  
5504 19TH STREET  
ZEPHYRHILLS, 33540

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
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 John W. Fries  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 4.17.98

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD  
NAME FRIES, JOHN W.  
STREET ADDRESS 2512 DOUBLETREE RD.  
CITY-ST-ZIP SPRING VALLEY CA

1.1 TITLE  
1.2 NAME PD  
1.3 STREET ADDRESS Fries, John W.  
1.4 CITY-ST-ZIP P.O. Box 433758 San Ysidro, CA 92143

TITLE VPD  
NAME FRIES, JEAN E.  
STREET ADDRESS 2512 DOUBLETREE ROAD  
CITY-ST-ZIP SPRING VALLEY CA

2.1 TITLE VPD  
2.2 NAME Fries, Jean E.  
2.3 STREET ADDRESS P.O. Box 433758  
2.4 CITY-ST-ZIP San Ysidro, CA 92143-3758

TITLE SD  
NAME WHITE, ROBERT  
STREET ADDRESS 6504 19TH STREET  
CITY-ST-ZIP ZEPHYRHILLS FL

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE  
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: John W. Fries  
(MEXICO) 01152 665 43129  
4.17.98 (619) 466 3933

CR2E037 (10/97)