

~~PROFIT CORPORATION~~
ANNUAL REPORT
1997



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

APPROVED AND FILED

97 SEP 15 AM 10:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 739660 *NON-PROFIT*
1. Corporation Name
*Lakeview United Methodist Church
Hispanic, Inc.*

Principal Place of Business Mailing Address
*11500 NW 12 Avenue
MIAMI, FL 33168*

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21	Suite, Apt. #, etc.	25	Suite, Apt. #, etc.	July 13, 1977			
22	City & State	27	City & State	4. FEI Number		Applied For	
23	Zip	28	Country	59-1236854		Not Applicable	
24	Country	29	Country	5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required <input type="checkbox"/> \$5.00 May Be Added to Fees	
				6. Election Campaign Financing Trust Fund Contribution		<input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
<i>FONSECA José Algerico. 11500 N.W. 12 AVE N. MIAMI, FL. 33168.</i>				B1 Name			
				B2 Street Address (P.O. Box Number is Not Acceptable)			
				B3			
				B4 City			
				FL B5 Zip Code			

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
	<i>P</i> TAMAYO Angel 2655 COLLINS AVE APT 2004 MIAMI, BEACH FL		
	<i>T</i> ZULON Leticia 8335 W 18 AVE HIALEAH, FL		
	<i>S</i> JOSÉ ALBERTO BOMBÓN 120 N.E. 121 ST NORTH MIAMI - FL.		
	<i>D</i> ZULON Leticia 8335 W 18 AVE HIALEAH, FL		
	<i>D</i> BOMBÓN Catalina 120 N.E. 121 ST NORTH MIAMI, FL		
	<i>D</i> BOMBÓN Leticia 19414 NW 79 CT MIAMI, FL 33015		
			800002295678-5 -09/17/97--01079--005 *****61.25 *****61.25
			<i>a. alan</i> 9/15/97

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE _____

CR2E034 (4/97)