

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Apr 29 1997 8:00am  
Secretary of State

PROFIT CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # 743490 (5)  
1. Corporation Name  
IGLESIA CRISTIANA DEL NUEVO TESTAMENTO, INC.

Principal Place of Business Mailing Address  
7525 N.W. 8 ST. MIAMI, FL 33126-9914  
13800 SW 8ST SUITE 182 MIAMI, FL 33184

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21 State, Apt. #, etc		26 13800 SW 8ST SUITE 182		7/5/78		1/1996	
22 City & State		27 STE 182		4. FEI Number		Applied For	
23 Zip		28 MIAMI FL.		57-1281347		Not Applicable	
24 Country		29 33184		6. Certificate of Status Desired		8.75 Additional Fee Required	
25		30 Dade		6. Election Campaign Financing Trust Fund Contribution		5.00 May Be Added to Fees	
				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
FERNANDEZ, JULIO C. 1851 SW 141 AVE. MIAMI, FL 33175				81 Name DE LA NOZ, LEOPOLDO			
				82 Street Address (P.O. Box Number is Not Acceptable) 970 HUNTING LODGE DR.			
				83			
				84 City MIAMI SPRINGS, FL FL 85 Zip Code 33166			

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: *[Signature]* (NOTE: Registered Agent signature required when reinstating) DATE: 4/22/97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	T.D.	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	EICHEUARRIA, TATAYA	1.2 NAME	
STREET ADDRESS	1825 SW 181 PLACE	1.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI, FL 33175	1.4 CITY - ST - ZIP	
TITLE	D	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	EICHEUARRIA, WILFREDO	2.2 NAME	
STREET ADDRESS	1825 SW 181 PL	2.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI, FL 33175	2.4 CITY - ST - ZIP	
TITLE	R	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	FERNANDEZ, JULIO C	3.2 NAME	
STREET ADDRESS	1851 SW 141 AV.	3.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI, FL 33175	3.4 CITY - ST - ZIP	
TITLE	S	4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	FERNANDEZ, SILVIA B.	4.2 NAME	
STREET ADDRESS	1851 SW 141 AV.	4.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI, FL 33175	4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	
		400002161444 -05/01/97--01026--003 ***165.00	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 in ink on 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: *[Signature]* DATE: 4/22/97 (705) 264-2719

CR2E034 (9/96)