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FILED

Feb 03 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 750979 (7)

1. Corporation Name

CRISTO SALVADOR PRESBYTERIAN CHURCH INC.



Principal Place of Business

Mailing Address

121 ALHAMBRA PLAZA
CORAL GABLES FL 33134121 ALHAMBRA PLAZA
CORAL GABLES FL 33134-52053. Date Incorporated or Qualified
02/08/19803a. Date of Last Report
01/31/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

4. FEI Number

59-2637637

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FERRER, JOHN M
6415 S.W. 107TH AVE.
MIAMI FL 33173

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 M. FERRER

1/24/97

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE TD ☐ DELETE
NAME FERRER, JOHN M
STREET ADDRESS 6415 S.W. 107 AVE.
CITY-ST-ZIP MIAMI FL 331731.1 TITLE SD ☒ Change ☐ Addition
1.2 NAME JOHN M. FERRER
1.3 STREET ADDRESS 6415 S.W. 107th Ave.
1.4 CITY-ST-ZIP Miami, FL 33173TITLE SD ☐ DELETE
NAME LOPEZ, VIOLETA
STREET ADDRESS 8050 N.W. 7TH ST., APT. 110
CITY-ST-ZIP MIAMI FL 331262.1 TITLE TD ☒ Change ☐ Addition
2.2 NAME VIOLETA LOPEZ
2.3 STREET ADDRESS 8050 N.W. 8th St. #110
2.4 CITY-ST-ZIP Miami, FL 33126TITLE PD ☐ DELETE
NAME GOMEZ, PABLO M
STREET ADDRESS 6415 S.W. 107 AVE.
CITY-ST-ZIP MIAMI FL 331733.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIPTITLE DP ☒ DELETE
NAME MAURY, ANA
STREET ADDRESS 11820 S W 24TH TERRACE
CITY-ST-ZIP MIAMI, FL 000004.1 TITLE DP ☒ Change ☐ Addition
4.2 NAME Zoraida JORSZ
4.3 STREET ADDRESS 10280 N.W. 9th St. # 103
4.4 CITY-ST-ZIP Miami, FL 33172TITLE PD ☐ DELETE
NAME CARMONA, JORGE
STREET ADDRESS 8735 SW 52ND STREET
CITY-ST-ZIP MIAMI FL5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIPTITLE D ☐ DELETE
NAME BIELSA, JOSE
STREET ADDRESS 9101 SW 34TH STREET
CITY-ST-ZIP MIAMI, FL 000006.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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: VIOLETA LOPEZ

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/24/97

(305) 567-2866

Date

Daytime Phone # 0027018

CR2E037 (9/96)