


FILE NOW: FILING FEE IS \$61.25

FILED
Mar 27 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 # **750979** (7)

1. Corporation Name

CRISTO SALVADOR PRESBYTERIAN CHURCH INC.



Principal Place of Business 121 ALHAMBRA PLAZA CORAL GABLES FL 33134	Mailing Address 121 ALHAMBRA PLAZA CORAL GABLES FL 33134
--	--

3. Date Incorporated or Qualified 02/08/1980
4. FEI Number 59-2637637
Applied For <input checked="" type="checkbox"/> Not Applicable

2. Principal Place of Business 21 6790 S.W. 56th St.	2a. Mailing Address 26 6790 S.W. 56th St.
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 Miami, Florida	City & State 28 Miami, Florida
Zip 24 33155	Country 25 U.S.A.
Zip 29 33155	Country 30 U.S.A.

5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent FERRER, JOHN M 6415 S.W. 107TH AVE. MIAMI FL 33173	
--	--

10. Name and Address of New Registered Agent	
81 Name Roger GALINDO	
82 Street Address (P.O. Box Number is Not Acceptable) 5625 S.W. 152nd Court.	
83 Miami, FL 33193	
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 **Roger GALINDO/Chairman President** *[Signature]* **Feb 15, 1998**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE SD	<input checked="" type="checkbox"/> DELETE	1.1 TITLE C/P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME FERRER, JOHN M		1.2 NAME Roger GALINDO	
STREET ADDRESS 6415 S.W. 107 AVE.		1.3 STREET ADDRESS 5625 S.W. 152nd Court	
CITY-ST-ZIP MIAMI FL		1.4 CITY-ST-ZIP Miami, FL 33193	
TITLE TD	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME LOPEZ, VIOLETA		2.2 NAME	
STREET ADDRESS 8050 N.W. 7TH ST., APT. 110		2.3 STREET ADDRESS	
CITY-ST-ZIP MIAMI FL		2.4 CITY-ST-ZIP	
TITLE PD	<input checked="" type="checkbox"/> DELETE	3.1 TITLE S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME GOMEZ, PABLO M		3.2 NAME Osigelia CASASUS	
STREET ADDRESS 6415 S.W. 107 AVE.		3.3 STREET ADDRESS 6571 S.W. 29th St.	
CITY-ST-ZIP MIAMI FL 33173		3.4 CITY-ST-ZIP Miami, FL 33155	
TITLE DP	<input checked="" type="checkbox"/> DELETE	4.1 TITLE DP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME ZORAIDA, JORZ		4.2 NAME Zonia QUINTANILLA	
STREET ADDRESS 10280 NW 9TH ST #103		4.3 STREET ADDRESS 8005 Lake Dr # 408	
CITY-ST-ZIP MIAMI FL		4.4 CITY-ST-ZIP Miami, FL 33166	
TITLE PD	<input type="checkbox"/> DELETE	5.1 TITLE PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME CARMONA, JORGE		5.2 NAME Jorge CARMONA	
STREET ADDRESS 8735 SW 52ND STREET		5.3 STREET ADDRESS 8735 S.W. 52nd St.	
CITY-ST-ZIP MIAMI FL		5.4 CITY-ST-ZIP Miami, FL 33165	
TITLE D	<input checked="" type="checkbox"/> DELETE	6.1 TITLE V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME BIELSA, JOSE		6.2 NAME Lazaro ESPINOSA	
STREET ADDRESS 9101 SW 34TH STREET		6.3 STREET ADDRESS 14848 S.W. 71st Lane	
CITY-ST-ZIP MIAMI, FL 00000		6.4 CITY-ST-ZIP Miami, FL 33193	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(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: *[Signature]* (VIOLETA LOPEZ) **Feb 15, 1998** (305) 477-9693

CR2E037 (10/97)