1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT # 750979**

1. Corporation Name

CRISTO SALVADOR PRESBYTERIAN CHURCH INC.

Principal Place of Bu	ısine
6970 SW 56TH ST MIAMI FL 33155 US	. •

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Mailing Address 6790 SW 56TH ST

6790 SW 56TH ST MIAMI FL 33155 US

2a. Mailing Address

City & State

Suite, Apt. #, etc.

26

27

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## FILED Feb 13, 1999 8:00 am Secretary of State

02-13-1999 90015 027 \*\*\*\*61.25

3. Date Incorporated or Qualifed

5. Certificate of Status Desired

02/08/1980

59-2637637

FEI Number

3. Name and Address of Current Registered Agent  3. Name and Address of New Registered Agent  4. City	Zip	Country	Zip	Cou	intry		6. Election Camp	paign Financing		, <b>\$5.00</b> May Be	
GALINDO, ROGER  5825 SW 152ND CT  MIAMI FL 33193  82 Street Address (P.O. Box Number is Not Acceptable)  83 Street Address (P.O. Box Number is Not Acceptable)  84 City  FL 85 Zip Code  85 Zip Code  85 Zip Code  86 Zip Code  87 Zip Code  88 Zip Code  88 Zip Code  88 Zip Code  89 Zip Code  89 Zip Code  80 Zip Code  81 Zip Code  81 Zip Code  82 Zip Code  83 Zip Code  84 City  FL 85 Zip Code  85 Zip Code  86 Zip Code  86 Zip Code  87 Zip Code  87 Zip Code  88 Zip Code  89 Zip Code  89 Zip Code  89 Zip Code  80	24	25 29 30		_		Trust Fund Contribution Added to Fees					
SALINDO, ROCER 5625 SW 152ND CT MIAMI FL 33193  82 Street Address (P.O. Box Number is Not Acceptable)  83 Street Address (P.O. Box Number is Not Acceptable)  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 agent or both. In the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the eigepointment, set registered; agent, and mentiles with, and except the obligation of, Section 617.0509, Florida Statutes.  SIGNATURE  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  CP GALINDO, ROCER  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  CP GALINDO, ROCER  13. TITLE  Change Addition  NAME  TO DELETE  13. TITLE  Change Addition  CPCZ, VIOLETA  STREET ADDRESS  CITY-ST-ZP  MIAMI FL 33193  14.OTTY-ST-ZP  TITLE  CASASUS, OSIGELIA  32.NAME  33. STREET ADDRESS  CONST-ZP  TITLE  Change Addition  Addition  Addition  Addition  Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  Change Addition  Addition  CONST-ZP  CHANGE AGAINST-ZP  CHANGES  CONT-ST-ZP  CHANGES  CONT-ST-ZP  DELETE  41.TITLE  Change Addition  Addition  Addition  Addition  Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  Change Addition  Addition  Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  Change Addition  Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  Change Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  Change Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  Change Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  Change Change  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  Change Change  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  Change Change			Registered Agent		<u> </u>		10. Name and Ad	ddress of New i	Registered	Agent	
MAMI FL 33193    B4   City   FL   85   Zip Code					81	Name					1
MAMI FL 33193    B4   City   FL   85   Zip Code	GALINDO.	ROGER	6-3-3-25 5 L. 3-275		82	Street Addr	ress (P.O. Box Numb	er is Not Accept	able)		
MIAMI FL 33193    Ba	5625 SW	152ND CT	1 1136 At 1 1 1 1			Ollock Addi	OSS (1 10. DOX 110			٠	
TI, 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 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, and accept the obligations of, Section S17.0503, Florida Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  CP  MAME  GALINDO, ROGER  1.1 TITLE  CP  MAMI FL 33193  1.1 TITLE  DOFE, VIOLETA  SERETADORESS  SECS SW 152ND CT  1.3 STREET ADDRESS  SECS SW 152ND CT  SE					83				•	,	
The present to the provisions of Sections 617.0502 and 617.1509. Florids Statutes, the above-named corporation submits this statement for the purpose of Changing its registered agent, or both, in the State of Florids, Such change was authorized by the corporation's board of directors. I hereby, accept the appointment as registered agent, and familiar with, and accept the obligations of, Section 617.0503, Florids Statutes.  SIGNATURE  Signature, upped or private of private agent and title if applicable.  OFFICERS AND DIRECTORS  TILE  OFFICERS AND DIRECTORS  TILE  OFFICERS AND DIRECTORS  TILE  OFFICERS AND DIRECTORS  TILE  OFFICERS AND DIRECTORS IN 12  TILE  OFFICERS AND	, in an i E	00100			-					les Zin C	odo.
Time CP					84	City			FL	05 Zip C	3.3
Time CP	11. Pursuant	to the provisions of Sections 617.0502	and 617.1508. Florida Statut	es, the a	bove-	named corp	poration submits this	statement for the	purpose of	changing its r	egistered
SIGNATURE    Signature, typed or printed name of registered agent and the f supplicable.   (NOTE Registered Agent signature required when relocated open talgesture required when relocated when talgesture required when relocated open talgesture required when relocated and place and addition.    12	office or r	egistered agent, or both, in the State of	Florida. Such change was a	uthorized	d by tr	ne corporation	on's board of director	s. I hereby acce	of the appoir	ntment as reg	istered
Title   CP	agent. La	m familiar with, and accept the obligation	ns of, Section 617.0503, Fig	rida Siai	ules.					•	
12. OFFICERS AND DIRECTORS  TITLE  CP GALINDO, ROGER STREET ADDRESS  5625 SW 152ND CT GIY-ST-ZIP TITLE  LOPEZ, VIOLETA STREET ADDRESS  8050 N.W. 7TH ST., APT. 110 22 STREET ADDRESS  CIY-ST-ZIP TITLE  CASASUS, OSIGELIA STREET ADDRESS  657.1: S.W. 29TH ST 33 STREET ADDRESS  CIY-ST-ZIP TITLE  DP DELETE  AL CITY-ST-ZIP  CHANGE  STREET ADDRESS  CIY-ST-ZIP TITLE  DP D DELETE  AL CITY-ST-ZIP TITLE  CARASUS, OSIGELIA STREET ADDRESS  CIY-ST-ZIP TITLE  DP D DELETE  AL CITY-ST-ZIP TITLE  CARASUS, OSIGELIA STREET ADDRESS  AL CITY-ST-ZIP TITLE  DP D DELETE  AL STREET ADDRESS  AL CITY-ST-ZIP TITLE  CARMONAL STREET ADDRESS  AL CITY-ST-ZIP TITLE  CARMONAL STREET ADDRESS  AL CITY-ST-ZIP  MIAMI FL 33166  AL CITY-ST-ZIP  MIAMI FL 33165  STREET ADDRESS  AL CITY-ST-ZIP  MIAMI FL 33165  STREET ADDRESS  BY 35 SW 52ND STREET  SS STREET ADDRESS  SS STREET	SIGNATURE	Chapture found or printed pages of registered agent a	nd title if unplicable (NOTE	Registerer	1 Agent	signature require	ed when reinstating)		DATE		<del></del>
TITLE CP GALINDO, ROGER STREET ADDRESS STREET ADDRE	12.				- rigona	<u> </u>		HANGES TO OF	FICERS AN	D DIRECTOR	RS IN 12
NAME GALINDO, ROGER 5625 SW 152ND CT 13 STREET ADDRESS CTY'S 1.2P MAIMI FL 33193				1.1 Τ	ITLE			tj.		Change	☐ Addition
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MIAMI FL 33165  TITLE  V/ANTA-TO-ASSTANDERSS  NAME  ESPINOSA, LAZARO  STREET ADDRESS  14848 SW 71ST AVE  63 STREET ADDRESS  CITY-ST-ZIP  MIAMI, FL 00000 33193  64 CITY-ST-ZIP  14 Library and the formation stated in Section 119 07(3)(i) Florida Statutes. I further certify that the information	STREET ADDRESS	2 7 7 79					• • .	13 .			
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MIAMI, FL 00000 33193  64 CITY-ST-ZIP  TALL Is reply control that the information stated in Section 119 07(3)(i). Florida Statutes, I further certify that the information	NAME	ESPINOSA, LAZARO		6.2 N	AME		,				
14. Learning contribution 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	STREET ADDRESS	14848 SW 71ST AVE	,	6.3 S	TREET	ADDRESS					
14. Learning contribution 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	CITY-ST-ZIP .	MIAMI, FL 00000 33193	_			I					
	14 Lhorobu	partiful that the information eventified with	this filing does not qualify fo	r the exe	emptio	n stated in	Section 119.07(3)(i),	Florida Statutes.	I further cer	tify that the in	formation

• I hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes. I number certify that the information indicated on this annual report or suppliemental 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 frustee 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, with all other like empowered.

SIGNATURE

CROGERCIONES AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

/-7-99

305 633-3456

Daytime Phone

.

Applied For

Not Applicable

\$8.75 Additional

Fee Required

CR2E037 (11/98)

Vol.