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NONPROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT # 752900

(1)

| RELIGIOUS OF THE APOSTOLATE OF FLORIDA, INC. | | | | | | |
|--|--|-------------------------------|--|-------------------------------|--|---|
| Principal Place of | of Business | Mailing Address | | | T I DOINE I DE BE BINCH FIOLID I ENE DE AN | 901 9101 0101 0101 0101 0101 0101 0101 |
| 300 N.W. 28TH AVE. 300 N.W. 28TH AVE MIAMI FL 33125 MIAMI FL 33125 | | | | | | |
| US | | US | | | 3. Date incorporated or Qualified | 3a. Date of Last Report |
| | | | | | 06/10/1980 | 03/28/1995 |
| Principal Place | ce of Business | 2a. Mailing Address | | | 4. FEI Number | Applied For |
| 1 Suite, Apt. #, etc. | | 26 Suite, Apt. #, etc. | | | 65-0225746 | Not Applicable \$8.75 Additional |
| 2 | | 27 | | Certificate of Status Desired | Fee Required | |
| City & State | | City & State | - | | 6. Election Campaign Financing | \$5.00 May Be |
| 3 | | 28 | | | Trust Fund Contribution | Added to Fees |
| Zip | Country | Zip | Cou | ntry | 8. This corporation has liability for i | intangible tax under s. 199.032, |
| 4 | 25 | 29 | 30 | | | Yes No |
| | 9. Name and Address of Curre | ent Hegistered Agent | | 81 Name | 10. Name and Address of New R | egistered Agent |
| | | | | 81 Name | | |
| |), MARIA DEL ROSARIO | | | 82 Street Add | ress (P.O. Box Number is Not Acceptab | ile) |
| | 42 PLACE | | | 83 | | |
| HIALEAH | FL 33012 | | | | | |
| | | | | 84 City | | FL 85 Zip Code |
| familiar with | ad agent, or both, in the State of Flo h, and accept the obligations of, Se Signature, typed or printed name of registered age | ction 617.0503, Florida Stati | utes. | corporation's boa | ration submits this statement for the pur ord of directors. I hereby accept the app of wharenstaingi | ontment as régistered agent. I am |
| 12. | OFFICERS A | ND DIRECTORS | 13. | | ADDITIONS/CHANGES TO CEL | |
| TITLE | D | DELETE | 111 | 1 | | Change Addition |
| NAME | BRITO, MARIA D. | | 1.2 N | | | |
| STREET ADDRESS | 300 N.W. 28TH AVE | | | REET ADDRESS | | |
| CITY-ST-ZIP TITLE | MIAMI FL | DELETE | 2.1 T | ITY - ST - ZIP | | Change Addition |
| NAME | DELGADO, MARIA DEL R. | | 22 N | | | |
| STREET ADDRESS | 300 N.W. 28TH AVE. | | | TREE I ADDRESS | | |
| CITY - ST - ZIP | MIAMI FL | | | DITY-ST-ZIP | | |
| TITLE | D | DELETE | | TLE | | Change Addition |
| NAME { | BERMUDEZ, FLORINDA | | 3 2 N | AME | | |
| STREET ADDRESS | 300 N.W. 28TH AVE | | 33S | TREET ADDRESS | | |
| CITY - ST - ZIP | MIAMI FL | | 34 (| DITY - ST - ZiP | | |
| TITLE | | □DELÉTE | 4 1 T | ITLE | | ☐ Change ☐ Addition |
| NAME | | | | IAME | | |
| STREET ADDRESS | | | | TREET ADDRESS | | |
| DITY-ST-ZIP | | ☐ DELETE | | ITY-S1-ZIP | | ☐ Change ☐ Addition |
| TITLE NAME | | [_]DELETE | . 51T | | | Change Agoitton |
| STREET ADDRESS | | | | TREET ADDRESS | | |
| CITY-ST-ZIP | | | | ITY-ST-ZIP | | |
| TITLE | | DELETE | 617 | | | Change Addition |
| NAME | | | 6.2 1 | | | |
| STREET ADORESS | | | | TREET ADDRESS | | |
| CITY - ST - ZIP | | | | ITY - ST - ZIP | | |
| 14. I do hereb certify that oath: that | y certify that the information supplie the information indicated on this ar I am an officer or director of the 🐠 | noual report or supplemental | furnished and annual resort ustee empowe address. | is true and accur | for the exemption stated in Section 119 ate and that my signature shall have the is report as required by Chapter 617, F | .07(3)(k). Florida Statutes. I further e same legal effect as if made under lorida Statutes; and that my name |

SIGNATURE: SISTER MARKA D RELEGION OF SIGNATURE AND TYPED OR PRINTED MARKE OF SIGNATURE AND TYPED OR PRINTED MARKET OR SIGNATURE AND TYPED OR PRINTED MARKET OF SIGNATURE AND TYPED OR PRINTED MARKET OF SIGNATURE AND TYPED OR PRINTED MARKET OR SIGNATURE AND TYPED OR PRINTED MARKET OF SIGNATURE AND TYPED OR PRINTED MARKET OR SIGNATURE AND TYPED OR PRINTED MARKET OR SIGNATURE AND TYPED OR SIGNATUR