## **FILE NOW: FILING FEE IS \$61.25**

**NONPROFIT CORPORATION** ANNUAL REPORT

1998



## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT** #

Principal Place of Business

300 N.W. 28TH AVE.

MIAMI FL 33125

(1)

Mailing Address

300 N.W. 28TH AVE

MIAMI FL 33125

RELIGIOUS OF THE APOSTOLATE OF FLORIDA, INC.

## FILED Apr 02 1998 8:00am Secretary of State

!	
3. Date Incorporated or Qualified	
06/10/1980	
4. FEI Number	Applied For

Applied For

NAME STREET ADDRESS CITY-ST-ZIP  MIAMI FL  BRITO, MARIA D.  (deceased)  12 NAME  13 STREET ADDRESS 14 CITY-ST-ZIP  MIAMI FL  13 OON.W. 28 AVE MI ami, FL. 33125-5056								65-0225746		] No	ot Applicable	
Tous Fund Contribution	2. Principal P	Place of Business	<b>⊢</b> ¬	Mailing Address								
City & State    City & State   City		Apt. #, etc. Suite, Apt. #, etc.					\$5.00 May Be					
B. Name and Address of Current Registered Agent    State   Deligation   Deligation	<b>-</b> '	е	28	City & State			7. Is this nonprofit corporation a homeowners association?					
Section	Zip	Country		Zip	Cou	untry		8. This corporation owes or has pai	d the cu	rrent year Int	tangible	
DELGADO, MARIA DEL ROSARIO 1310 W. 42 PLACE HALEAH FL 33012  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 eigent, or both, in the State of Florida Subtutes, the above-named corporation submits this statement for the purpose of changing its registered eigent, or both, in the State of Florida Subtutes, the above-named corporation submits this statement for the purpose of changing its registered eigent, or both, in the State of Florida Subtutes, the above-named corporation submits this statement for the purpose of changing its registered signer. I am flammative with, and accept the appointment as registered signer, and the representation of the change its registered signer. I am flammative with, and accept the obligations of, Section 617.0503, Florida Statutes, and the remaind of registered signer, or both, in the State of Florida Statutes, and the remaind of registered signer. I am flammative with, and accept the appointment as registered signer. I am flammative with, and accept the obligations of, Section 617.0503, Florida Statutes and the remainding)  DELGADO FIGURES AND DIRECTORS  DELETE  11 TITLE  DELETE  11 TITLE  DELETE  11 TITLE  DELETE  12 NAME  13 STREET ADDRESS  14 CITY-ST-2P  MIAMI FL  DELETE  31 TITLE  DELETE  31 TITL	:4]	25	29		30							
DELGADO, MARIA DEL ROSARIO  1310 W. 42 PLACE HALEAH FL 33012  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 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. Harmaniar with, and accept the objection of, Section 617.0503, Plorida Statutes.  SIGNATURE  TILL D  BRITO, MARIA D  BRI		9. Name and Address of Cur	rent Regio	stered Agent			1	10. Name and Address of New Rec	istered	Agent		
13.10 W. 42 PLACE HALEAH FL 33012    Salicity   Salicit	DE 440	A 111011 DEL BOATES				MARÍA DEL ROSARIO DELGA DO						
HALEAH FL 33012    Ba						82 Street Add	dress	s (P.O. Box Number is Not Acceptab	<del>e</del> )_		-	
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The Pursuions of Sactions 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. I am familiar with, and accept the obligations of, Section 617,0503, Florida Statutes.   SIGNATURE	HIALEA	1 FL 33012				∾  /	41.	AMI				
11. Pursuant to the provisions of Socions 617.0502 and 617, 1508, Floride Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS  TITLE  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  TITLE  14. TITLE  15. OFFICERS AND DIRECTORS  TITLE  15. OFFICERS AND DIRECTORS  TITLE  15. STREET ADDRESS  TON-ST-2P  TITLE  15. TITLE  15. STREET ADDRESS  CITY-ST-2P  TITLE  15. TITLE	)									85 Zip (	Code	
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Signature, typed or primed name of regulated agent and lite if a porcious in the state of the special in the special interest in the special interest in the special interest in the special	office or r	registered agent, or both, in the St	ate of Flori	da. Such change was a	authorize	d by the corpor.	ation	's board of directors. I hereby accep	t the app	changing in	registered	
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Increby certify that the information supplied with this tilling does not qualify for the exemption stated in Section 119.07(3)(1), 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	CITY-ST-ZIP		of college of 2	rition about the second of			- P-	ation 440 07/2/6) Flexible Contribution 1.1	(ueth or o	nutifi, éhné sk-	information	
	indicated	centry that the information supplied on this annual report or supplement	a with this f ental annua	tiling does not qualify to il report is true and acc	or the ex- curate an	emption stated in dithat my signal	in Se ture s	ction 119.07(3)(1), Florida Statutes. 11 shall have the same legal effect as if	made ur	miny mat the ider oath; tha	at lam an	

officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Block 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE:

SISTER MAKIA DEL ROCARIO DELBADO, R.A.

3/19/98 (1-305-541-1048)