

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.  
AMOUNT DUE ON OR BEFORE 8/9/95: \$155 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$365)**

**NONPROFIT CORPORATION ANNUAL REPORT 1995**



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

**FILED SECRETARY OF STATE DIVISION OF CORPORATIONS**

**95 JUN 20 AM 8:25**

**DOCUMENT # 753020 (7)**

1. Corporation Name  
**IGLESIA BAUTISTA HOREB, INC.**

Principal Place of Business Mailing Address  
**795 WEST 68TH STREET HALEAH FL 33014-4814**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified <b>06/19/1980</b>	3a. Date of Last Report <b>04/28/1994</b>
4. FEI Number <b>59-1963408</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status <input checked="" type="checkbox"/>	<b>FILING FEE IS \$61.25</b>
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
24 Zip	25 Country
28 Zip	30 Country

9. Name and Address of Current Registered Agent  
**RAYVIS, MYRON J.  
8821 S.W. 69TH COURT  
MIAMI FL 33156**

10. Name and Address of New Registered Agent

81 Name	<b>Fernandez, Ottoniel Rev.</b>		
82 Street Address (P.O. Box Number is Not Acceptable)	<b>6974 Bottle Brush Dr.</b>		
83			
84 City	<b>Miami Lakes</b>	85 FL	Zip Code <b>33014</b>

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 Rev. Ottoniel Fernandez, Rev. Ottoniel Fernandez, President DATE 6/16/95

12. OFFICERS AND DIRECTORS	
TITLE	<b>PD</b>
NAME	<b>FERNANDEZ, OTTONIEL (REV)</b>
STREET ADDRESS	<b>6974 BOTTLE BRUSH DR</b>
CITY - ST - ZIP	<b>MIAMI LAKES FL</b>
TITLE	<b>VD</b>
NAME	<b>GARCIA, JULIO</b>
STREET ADDRESS	<b>870 E 28TH ST</b>
CITY - ST - ZIP	<b>HIALEAH FL</b>
TITLE	<b>SD</b>
NAME	<b>DIAZ, ZOILA</b>
STREET ADDRESS	<b>670 W 15TH ST</b>
CITY - ST - ZIP	<b>HIALEAH FL</b>
TITLE	<b>TD</b>
NAME	<b>GOMEZ, MIRIAM</b>
STREET ADDRESS	<b>1869 W.63RD ST.</b>
CITY - ST - ZIP	<b>HIALEAH FL</b>
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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: Rev. Ottoniel Fernandez, Rev. Ottoniel Fernandez DATE 6/16/95 DAYTON PHONE # 821-3632

CR2E037 (3/95)