

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # 764986 (6)

1. Corporation Name

CONGREGACION CRISTIANA DE MIAMI, INC.



Principal Place of Business

Mailing Address

4300 SW 73 AVE
STE 102
MIAMI FL 33155
US

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STE 102
MIAMI FL 33155
US

3. Date Incorporated or Qualified
09/13/1982

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

29 Zip

Country

4. FEI Number
65-0045802

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DE AVILA, GERARDO
10951 SW 64 ST.
MIAMI FL 33173

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE VD DELETE
NAME MASARIEGOS, HAROLDO
STREET ADDRESS 2430 SW 127 AVENUE
CITY-ST-ZIP MIAMI, FL 00000

TITLE PD DELETE
NAME DE AVILA, GERARDO
STREET ADDRESS 10951 SW 64TH ST.
CITY-ST-ZIP MIAMI FL

TITLE TD DELETE
NAME DE AVILA, D
STREET ADDRESS 13870 SW 62ND STREET
CITY-ST-ZIP MIAMI FL

TITLE SD DELETE
NAME MARTINEZ, DAMARIS
STREET ADDRESS 11951 SW 40 STREET
CITY-ST-ZIP MIAMI FL

TITLE D DELETE
NAME MASARIEGOS, AROLDLO
STREET ADDRESS 6444 SW 40 ST #14
CITY-ST-ZIP MIAMI FL

TITLE D DELETE
NAME MERIDA, OSCAR
STREET ADDRESS 731 NE 3 PLACE
CITY-ST-ZIP HIALEAH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE TD Change Addition
1.2 NAME Pereda, Manuel
1.3 STREET ADDRESS 13850 S.W. 102 Lane
1.4 CITY-ST-ZIP Miami, FL 33188

2.1 TITLE SD Change Addition
2.2 NAME LOPEZ-ISA, ADA
2.3 STREET ADDRESS 15153 N.W. 89th Pl.
2.4 CITY-ST-ZIP Miami, FL 33016

3.1 TITLE D Change Addition
3.2 NAME LOPEZ-ISA, MODESTA
3.3 STREET ADDRESS 11421 S.W. 35 Lane
3.4 CITY-ST-ZIP Miami, FL 33165

4.1 TITLE D Change Addition
4.2 NAME DE AVILA, DANIEL
4.3 STREET ADDRESS 13867 S.W. 64 ST.
4.4 CITY-ST-ZIP Miami, FL 33183

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE Change 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 119.07(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. GERARDO DE AVILA 8/12.4.1996 (305) 266-5612

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)