

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 13, 2004 8:00 am
Secretary of State

09-13-2004 90010 046 ****70.00

DOCUMENT # N02000005250

1. Entity Name
JESUS THE CHRIST'S TRANSFORMING CENTER, INC.



Principal Place of Business
**1378 WEST 69 ST.
MIAMI, FL 33014**

Mailing Address
**P.O. BOX 5406
MIAMI LAKES, FL 33014**

2. Principal Place of Business
1284 W. 31 Street

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

05052004 Chg-NP CR2E037 (10/03)

City & State
Hialeah, FL

City & State

4. FEI Number
APPLIED FOR 42-1625456

Applied For
Not Applicable

Zip
33012

Country
USA

Zip

Country

5. Certificate of Status Desired

☒ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**MONTEAGUDO, MANUEL
1378 WEST 69 ST.
MIAMI, FL 33014**

7. Name and Address of New Registered Agent

Name
Monteagudo, Manuel

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

1284 West 31 Street

City
Hialeah

FL

Zip Code
33012

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **Manuel Monteagudo** *Manuel Monteagudo*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by September 8, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**CD
QUINONES, RALPH
1378 WEST 69 ST.
MIAMI, FL 33014** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**CD
MONTEAGUDO, MANUEL
1378 WEST 69 ST.
MIAMI, FL 33014** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
RUIZ, PEDRO
1378 WEST 69 ST.
MIAMI, FL 33014** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**VD
FERRER, NOEMI
1378 W 69 STREET
MIAMI, FL 33014** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**President
Quinones, Ralph
1284 West 31 Street
Hialeah, FL 33012** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**Vice President
Monteagudo, Manuel
1284 West 31 Street
Hialeah, FL 33012** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**Treasurer
Ferrer, Noemi
1284 West 31 Street
Hialeah, FL 33012** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

12. I hereby certify that the 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 indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Manuel Monteagudo** *Manuel Monteagudo*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

9-6-04

305-825-8487