

**2007 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 30, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # N04000002110**

1. Entity Name  
**CANAAN HISPANIC BAPTIST CHURCH CORP.**



Principal Place of Business  
**1501 S.W. 27 AVE  
FT LAUDERDALE, FL 33312**

Mailing Address  
**1465 SW 28 WAY  
FORT LAUDERDALE, FL 33312**



04192007 No Chg-NP CR2E037 (4/06)

4. FEI Number  
**20-0936031**

Applied For  
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

**DO NOT WRITE IN THIS SPACE**

**6. Name and Address of Current Registered Agent**

**SALCEDO, ALFREDO  
1465 S.W. 28TH WAY  
FT. LAUDERDALE, FL 33312**

**DO NOT WRITE  
IN THIS SPACE**

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

(NOTE: Registered Agent signature required when reinstating)

DATE **04-20-07**

**Filing Fee is \$61.25  
Due by May 1, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PCEO  
SALCEDO, ALFREDO  
1465 SW 28 AVE  
FT. LAUDERDALE, FL 33312**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VP  
SALCEDO, HUMBERTO  
1664 SW 29 TR, APT A  
FT. LAUDERDALE, FL 33312**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**S  
RODRIGUEZ, MARY L  
4300 SHERIDAN ST-APT #244  
HLLWD, FL 33021**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**T  
VILLALOBOS, ENITH  
8739 N.W. 108 LN  
HIALEAH, FL 33018**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

000000746725  
05/16/07-80079-015 61.25

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 lines empowered.

SIGNATURE: *Alfredo Salcedo*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date **04-20-07** Daytime Phone # **954-7977241**