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**Mar 29, 1999 8:00 am**  
**Secretary of State**

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NONPROFIT  
 CORPORATION  
 ANNUAL REPORT  
**1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

**DOCUMENT # N15021**

1. Corporation Name

**IGLESIA BAUTISTA DE NORTH MIAMI, INC.**

Principal Place of Business

15395 NORTH MIAMI AVE  
 MIAMI FL 33169  
 US

Mailing Address

15395 NORTH MIAMI AVE  
 MIAMI FL 33169  
 US



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

21

26

05/21/1986

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. FEI Number  
 65-0138009

Applied For  
 Not Applicable

22 City & State

27 City & State

5. Certificate of Status Desired

\$8.75 Additional Fee Required

23 Zip Country

28 Zip Country

6. Election Campaign Financing  
 Trust Fund Contribution

\$5.00 May Be Added to Fees

24

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PEREDA, JOSE I.  
 46 NE 171 TERR  
 NO MIAMI BCH FL 33162

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 *Jose I. Pereda*

3-15-99

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD  DELETE  
 NAME PEREDA, JOSE I  
 STREET ADDRESS 46 NE 171 TERR  
 CITY-ST-ZIP NO MIAMI BCH FL

1.1 TITLE  Change  Addition  
 1.2 NAME  
 1.3 STREET ADDRESS  
 1.4 CITY-ST-ZIP

TITLE ~~TR~~  DELETE  
 NAME BARRIOS, FRED  
 STREET ADDRESS 13641 N. MIAMI CT.  
 CITY-ST-ZIP N. MIAMI FL

2.1 TITLE  Change  Addition  
 2.2 NAME *Treasurer*  
 2.3 STREET ADDRESS *Jorge Chavez*  
 2.4 CITY-ST-ZIP *1811 N.W. 135 ST*  
*Miami, Fl. 33167*

TITLE SD  DELETE  
 NAME PEREDA, JOSE S.  
 STREET ADDRESS 200 E. 63RD ST.  
 CITY-ST-ZIP HIALEAH FL

3.1 TITLE  Change  Addition  
 3.2 NAME  
 3.3 STREET ADDRESS  
 3.4 CITY-ST-ZIP

TITLE D  DELETE  
 NAME NIEVES, GEORGINA A  
 STREET ADDRESS 46 NE 171 TERR  
 CITY-ST-ZIP NO MIAMI BCH FL

4.1 TITLE  Change  Addition  
 4.2 NAME  
 4.3 STREET ADDRESS  
 4.4 CITY-ST-ZIP

TITLE  DELETE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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

TITLE  DELETE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

6.1 TITLE  Change  Addition  
 6.2 NAME  
 6.3 STREET ADDRESS  
 6.4 CITY-ST-ZIP

14. 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 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, with all other like empowered.

SIGNATURE: *Jose I. Pereda*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-15-99

Date

305-849-7235

Daytime Phone #

0033794

CR2E037 (1/98)