FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

Principal Place of Business

DOCUMENT # N17579

(6)

Mailing Address

MINISTERIO NUEVA JERUSALEN INTERNACIONAL INCORPO RATED

5400 SW 122 AVENUE MIAMI FL 33175 2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23		5400 SW 122 AVENUE MIAMI FL 33175-5533			
		2a. Mailing Address			
		Suite, Apt. #, etc. 27 City & State 28			

FILED Apr 07 1997 8:00am

Apr 0 / 199 / 8:00an Secretary of State

3a. Date of Last Report

03/29/1996

(305) 53-1915 Daytime Phone # 0032876

Applied For Not Applicable \$8.75 Additional

3. Date Incorporated or Qualified

10/29/1986

5. Certificate of Status Desired

4. FEI Number 59-2732176

22		27					, 00 (10quil00		
City & Stat	e	City & St	ate			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip	Country	Zip	T	Contry	·	8. This corporation has liability for			
24	25	29	30				Yes No		
	9. Name and Address of Curre	ent Registered Age	nt			10. Name and Address of New Ro	gistered Agent		
				61	Name	ORDONES DEVANIR	. <u>A</u>		
CELADO	, MANUEL			iz		Address (P.O. Box Number is Not Accepta			
	122 AVENUE		•		5	400 SW 122 AUC			
MIAMI F				61					
				84	City		85 Zip Code		
					. O,	MIAMI	FL 85 Zio Code 38175		
11. Pursuant	to the provisions of Sections 617.05	02 and 617.1508, F	lorida Statutes, I	he above	named	corporation submits this statement for the	purpose of changing its registered		
agent. I a	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 amiliar with, and accept the obligations of, Section 617.0509, Florida Statutes.								
SIGNATURE	DRYANIRA CORS	ones	Weekn	in 4	arl	ones .	3/11/97		
	Signature, typed or printed name of registered a	·	NOTE Re		ent signature	required when reinstating)	DATE		
12.	T'	ND DIRECTORS	DELETE	13.		ADDITIONS/CHANGES TO OFFI			
TITLE	PD	L) DELETE	1.1 TITLE	1	PTD	Change		
NAME	CORDONES, RICHARD			1.2 NAME					
STREET ADDRESS	5400 SW 122 AVE		1	1.3 STREET	1				
CITY-S1-ZIP TITLE	MIAMI FL		DELETE	1.4 CITY - S	IT-ZIP		Change Addition		
	TD	L) DEFEIG	2.1 TITLE	l	5D	Custon C Vincinos		
NAME	CORDONES, DEYANIRA			2.2 NAME					
STREET ADDRESS	5400 SW 122 AVE		Į.	2.3 STREET	- 1	,			
CITY-ST-ZIP TITLE	MIAMI FL		DELETE	2.4 CITY - 5 3.1 TITLE	ST-ZIP	, 5	Change Addition		
NAME	SD CELADO, MANUEL	<i>y</i> =	Coccin	3.2 NAME		DASilva, Luis Rev.	Orașine Pradition		
STREET ADDRESS	5400 SW 122 AVENUE		ľ	3.3 STREET		5400 SW 122 Ave	ľ		
CITY-S1-ZIP	MIAMI FL		- 1	3.4. CITY-5		MIAMI F1. 33175	_		
TITLE	T	ъ	DELETE	4.1 TITLE	31-TIL		Chanca M Addition		
NAME	SANCHEZ, LYSSIL R.	7	`	4. 2 NAME		BANCHEZ, Luis Rev	•		
STREET ADDRESS	13781-G SE 84 AVENUE		f	4.3 STREET		6400 SW 122 AVE	· ·		
CITY-ST-ZIP	MIAMI FL			4.4 CITY-S		MIAMI F1. 3317	5		
TITLE			DELETE	5.1 TITLE		7	☐ Change ★ Addition		
NAME			I	5.2 NAME		GARAGOT Julio	• ·		
STREET ADDRESS			•	5.3 STREET	ADDRESS	5400 5W 122 AVE			
CITY-SI-ZIP				5.4 CITY-9	ST-ZIP	MININ, Fl. 33175	5		
FITLE		L	DELETE	6.1 TITLE	:		Change Addition		
NAME			L	6.2 NAME					
STREET ADDRESS			1	6.3 STREET	ADDRESS				
CHY-ST-7IP				6.4 CITY - 5		'			
14. I do here information	by certify that the information suppli on indicated on this annual report or	ed with this filing do supplemental anni	es not qualify to	r the exe	mption sl	tated in Section 119.07(3)(i), Florida Statute that my signature shall have the same leg	es. I further certify that the		
l am an c	fficer or director of the corporation	or the receiver or tru	istee empowere	d to eked	cute this r	that my signature shall have the same leg eport as required by Chapter 617, Florida	Statutes; and that my name		
appears	in Block 12 or Block 13 if changed.	or on an attachmen	(with an ackdres	S. /			/ Z A T		