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Jun 19 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra S. Morton Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N18626** (4)

1. Corporation Name

CENTRO EVANGELISTICO MISIONERO, INC.

Principal Place of Business

**3141 EAST 4 AVENUE
HIALEAH FL 33013**

Mailing Address

**3141 EAST 4 AVENUE
HIALEAH FL 33013-3211**



3. Date Incorporated or Qualified
01/06/1987

3a. Date of Last Report
03/14/1996

2. Principal Place of Business

21 CENTRO EVANG Mis. Inc

2a. Mailing Address

26 31-41 E 4th Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 31-41 E 4th Ave

27 Hialeah FL

City & State

City & State

23 Hialeah FL

28 33013 FL

Zip

Country

Zip

24 33013

25 USA

29

30

9. Name and Address of Current Registered Agent

**MESA, ISABEL
3141 EAST 4 AVENUE
HIALEAH FL 33013**

10. Name and Address of New Registered Agent

Name **Martha Mendieta (treasure)**

Street Address (P.O. Box Number is Not Acceptable)
7900 NW 14 AVE

Miami FL

City **Miami**

FL 35 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 resigning)

DATE

Martha Mendieta 06/10/97

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	MESA, ISABEL	
STREET ADDRESS	3141 EAST 4 AVENUE	
CITY-ST-ZIP	HIALEAH FL 33013	

TITLE	VD	<input type="checkbox"/> DELETE
NAME	MESA, ALICIA	
STREET ADDRESS	3141 EAST 4 AVENUE	
CITY-ST-ZIP	HIALEAH FL 33013	

TITLE	TD	<input type="checkbox"/> DELETE
NAME	MESA, ADRIAN	
STREET ADDRESS	3141 EAST 4 AVENUE	
CITY-ST-ZIP	HIALEAH FL 33013	

TITLE	SD	<input type="checkbox"/> DELETE
NAME	PEREZ, CARLOS	
STREET ADDRESS	3141 EAST 4 AVENUE	
CITY-ST-ZIP	HIALEAH FL 33013	

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

14. I do 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.

SIGNATURE:

STEFANOS MISIONERO

06 02 97

CR2E037 (9/96)