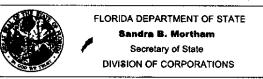
SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT CORPORATION



In 1 27 1000 0.000m

ANNUAL REPORT Secretary of State					Jul 2 / 1998	Jul 2/ 1998 8:00am	
1998 DIVISION OF CORPORATIONS					Secretary of State		
DOCUMENT # N23702 (6)					Scordary	of State	
CENTRO CRISTIANO FUENTE DE VIDA, INC.							
Principal Place of Business Mailing Address						IEIN BIBIN BIBIN BIBIN BIBIN 1881	
7400 NW 7TH ST 9780 JAMAICA DR.					Date Incorporated or Qualified		
201-203 MIAMI FL 33189-1753 US					12/02/1987		
US					4. FEI Number 65-0025405	Applied For	
2. Principal Place of Business 2a. Malling Address			ress			Not Applicable \$8.75 Additional	
	ME	26 5	ame		5. Certificate of Status Desired	Fee Required	
Suite, Apt. #, etc. Suite, Apt. #, etc. 27			F, etc.		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
City & State City & State				∤	7. Is this nonprofit corporation a homeowne	s association?	
Zip	Country	28 Zip		Country	8. This corporation owes or has paid the cu	No Tent year intangible	
24	25	29	30		Personal Property Tax due June 30.	Yes No	
9. Name and Address of Current Registered Agent 1 81 Name					10. Name and Address of New Registered	Agent	
MARRERO, RADAMES 82 Street Address (idress (P.O. Box Number is Not Acceptable)		
9780 JAMAICA DRIVE				83	10 1 1		
MIAMI FL	. 33169						
				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	Signature, typed or printed name of registe	red agent and title if applicable.	(NOTE: Reg	stered Agent signature n	equired when reinstating) DATE		
12.		RS AND DIRECTORS		3.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12	
NAME	PTR Marrero, radames	الـا	/LLC I C	1 TITLE 2 NAME		Change Addition !	
STREET ADDRESS				S STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL			CITY-ST-ZIP			
TITLE	VIR	П		1 TITLE		Change Addition	
NAME :	Marrero, nydia	_	2.3	2 NAME			
STREET ADDRESS			2.3	STREET ADDRESS			
CITY-ST-ZIP	MIÁMI FL			CITY-ST-ZIP			
TITLE NAME	D Marre ro, Nydia	L [, LLC I L	1 TITLE		Change Addition	
STREET ADDRESS			1	NAME STREET ADDRESS	.•		
CITY-ST-ZIP	MIAMI FL			CITY-ST-ZIP			
TITLE	\$			TITLE		Change Addition	
NAME	GUSTAVO, MOJICA		4.5	NAME			
STREET ADDRESS			4.5	STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL			CITY-ST-ZIP			
TITLE NAME	TTR Melvin Chin		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ITITLE	7000026023	Change Addition	
STREET ADDRESS	9365 SW 171 ST TERRAC	F		NAME STREET ADDRESS	-07/30/98010170:	32	
CITY-ST-ZIP	MIAMI FL	-		CITY-ST-ZIP	***8.75	of two	
TITLE				TITLE		Change Addition	
NAME		<u></u>		NAME	7000025023		
STREET ADDRESS				STREET ADDRESS	-07/30/980101703 ***61.25	17.27	
14. I hereby c	ertify that the information supplies	ad with this filling does not a		CITY-ST-ZIP		that the Information	
	on the annual cones or complete	and a serial serial between the force		p.io. statou III 80	ection 119.07(3)(I), Florida Statutes. I further certify	mer nio miormation	

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 op an attachment with an address.