FILE NOW: FILING FEE IS \$61.25

N**ON**PROFIT · * CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #
1. Corporation Name

N26818

(7)

MIAMI GRACE CHURCH, INC.

Principal Place of Business Mailing Address									
14470 SW 71 MIAMI FL 331		14470 SW 71 LANE MIAMI FL 33183							
						3. Date Incorporated or Qualified 06/07/1988	3a. D	ate of Last 01/30/19	
2. Principal Pla	ace of Business	2a. Mailing Address				4. FEI Number 59-2818663			Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.						Additional	
22		27			5. Certificate of Status Desired	`⊠′		Required	
City & State		City & State			6. Election Campaign Financing		\$5.0	O May Be	
23		28	1 0			Trust Fund Contribution			d to Fees
Zip	Country 25	Zip 29	30 Cour	ntry		This corporation has liability for Florida Statutes	intangible t		199.032,
24	9. Name and Address of Currer		130	-		10. Name and Address of New		<u> </u>	
				81	Name		-		
LOPEZ, S	Samuel A.			82	Street Add	ress (P.O. Box Number is Not Accepta	ble)		
14470 S	W 71 LANE								
MIAMI FL	L 33183			83					
			•	84	City			85 Zip	o Code
44 Durament t	to the provisions of Castions 517.0500	2 and 617 1509. Elected Statute	s the abo		named corpo	oration submits this statement for the pu	FL	anoina ita r	ogistored office
or register	ed agent, or both, in the State of Flori	ida. Such change was authorize	ed by the c	orp	oration's boa	ard of directors. I hereby accept the app	nointment a	s registered	agent. I am
	th, and accept the obligations of, Sect	tion 617,0003, Florida Statties.	•						
SIGNATURE _	Signature, typed or printed name of registered agent	t and title if applicable (NO	II Registered	Agen	nt signature require	ad when renstating"	DATE		
12.		D DIRECTORS	13.			ADDITIONS/CHANGES TO OF	FICERS AN		
TITLE	D COREZ CAMUELA	DELETE	1170					☐ Change	☐ Addition
NAME	LOPEZ, SAMUEL A. 14470 S.W. 71 LANE		1 2 NA						
STREET ADDRESS	MIAMI FL		14 CT		ADDRESS				
CITY - ST - ZIP	D	DELETE	2 1 Til	-	11-20			Change	Addition
NAME	PECINA, NACHO	_	2 2 NA	ME					
STREET ADDRESS	14326 SW 97 TERRACE		2 3 ST	REET	ADDRESS				
CITY-SF-ZIP	MIAMI FL		2 4 0	TY - 9	ST-ZIP	<u> </u>	198	45	
TITLE	- '	DP DELETE		3 1 TITLE			[001	111) S hange	■ Addition
NAME	BLANCO, RODOLFO		3 2 NA	ME		***70.00			
STREET ADDRESS	14748 SW 66 TERRACE				ADDRESS				
CHY-ST-ZIP TITLE	MIAMI FL	DELETE	3 4 C		ST-ZIP			Change	Addition
NAME		[]ptcc,c	4.2 N					C.Idrigo	
STREET ADDRESS				_	T ADDRESS				
CITY-ST-ZIP			1		ST-ZIP				
TITLE		DELETE	5 1 Ti	TLE				Change	☐ Addition
NAME			5 2 NA	ME					
STREET ADDRESS			5 3 ST	REET	T ADDRESS				
CITY-ST-ZIP		Morrete	_		ST-ZIP			Change	☐ Addition
TITLE		DELETE	61 îli					Change	☐ Addition
NAME CERCET ADMOTCO			62 NA		T ADDRESS				
STREET ADDRESS CITY-ST-Z-P					ST-ZIP				
14. I do hereb	y certify that the information supplied	with this filing is voluntarily furn				for the exemption stated in Section 119 rate and that my signature shall have the	9.07(3)(k), F	lorida Statut	tes. I further
certify that oath; that appears in	t the information indicated on this ann I am an officer or director of the core n Block 12 or Block 13 if changes or	und report of supplemental anni oration of the receiver or truster on an artichment with an addr	ual report i e empower ess.	s tru red	ue and accura to execute th	ate and that my signature shall have th his report as required by Chapter 617, I	e same lega Florida Statu	al effect as if utes; and tha	I made under at my name

SIGNATURE: __

SAMUCY A. LUPCZ SIGNATURE AND TYPES OF PRINTED NAME OF SIGNATURE OF DIRECTOR

1/22/96 (305) 382-9/09
Dayline Prope #

CR2E037 (12/95)