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Feb 28 1997 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N27723 (8)

1. Corporation Name

MINISTERIO EVANGELICO DEL NUEVO PACTO, INC.



Principal Place of Business

Mailing Address

1180 NW 124TH ST  
MIAMI FL 33168

1180 NW 124TH ST  
MIAMI FL 33168-6434

3. Date Incorporated or Qualified  
06/03/1988

3a. Date of Last Report  
04/12/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

4. FEI Number  
65-0188263

Applied For  
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SEBASTIAN, MIGUEL  
1180 NW 124TH ST  
MIAMI FL 33168

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD  
NAME SEBASTIAN, MIGUEL  
STREET ADDRESS 1180 NW 124TH ST  
CITY-ST-ZIP MIAMI FL

1.1 TITLE PD  
1.2 NAME Sebastian Miguel  
1.3 STREET ADDRESS 1180 NW.124th Street  
1.4 CITY-ST-ZIP Miami, Fl. 33168

TITLE VD  
NAME BATISTA, RAFAEL  
STREET ADDRESS 1180 NW 124TH ST  
CITY-ST-ZIP MIAMI FL

2.1 TITLE VD  
2.2 NAME Batista Rafael  
2.3 STREET ADDRESS 1180 NW.124th Street  
2.4 CITY-ST-ZIP Miami, Fl. 33168

TITLE SD  
NAME BATISTA, JUSTINA  
STREET ADDRESS 1180 NW 124TH ST  
CITY-ST-ZIP MIAMI FL

3.1 TITLE SD  
3.2 NAME Batista Justina  
3.3 STREET ADDRESS 1180 NW.124th Street  
3.4 CITY-ST-ZIP Miami, Fl. 33168

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 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.

Miguel Sebastian

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Miguel Sebastian 2-24-97

Date

Daytime Phone # 0032282

CR2E037 (9/96)