	FILE NOW: FIL	ING FEE IS \$6	1.25	-	
NONPROFIT CORPORATION ANNUAL REPORT 1996		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS			
DOCUI	MENT # N2815				
1. Corporation REJOIC	E IN THE LORD, INC.				
neoore					
Principal Place	e of Business	Mailing Address			FOI OF STATE OF STATE OF STATE OF STATE OF STATE
C/O JESUS GOMEZ         C/O JESUS GOMEZ           1731 SW 96 AVENUE         1731 SW 96 AVENUE           MIAMI FL 33165         MIAMI FL 33165					
		······································		3. Date Incorporated or Qualified 08/31/1988	3a. Date of Lest Report 01/27/1995
2. Principal Pla	ace of Business	2a. Mailing Address 26		4. FEI Number 65-0075858	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc. 27		5. Certificate of Status Desired	S8.75 Additional Fee Required
City & State	9	City & State		6. Election Campaign Financing Trust Fund Contribution	Added to Fees
Zip 24	Country 25	Zip	Country 30	8. This corporation has liability for in	
	9. Name and Address of Curre		81 Name	10. Name and Address of New Re	
				ess (P.O. Box Number is Not Acceptable	N
1731 SW	/ 98 AVENUE				
miami fi	L 33165		83		
			84 City		FL 65 Zip Code
familiar wit	ed agent, or both, in the State of Flor th, and accept the obligations of, Sec Signature, typeo or printed name of registered agen	tion 617.0503, Florida Statutes	red by the corporation's boar 5, 21E: Registered Agent signature required	d of directors. I hereby accept the appo	Intment as régistered agent. I am
12.	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFIC	
NAME	lopez, gil		1.1 TITLE 1.2 NAME		CERS AND DIRECTORS IN 12
STREET ADDRESS	10200 SW 122ND STREET		1.3 STREET ADDRESS		
CITY-ST-ZIP TIFLE	MIAMI FL 33176 TD		1.4 CITY-ST-ZIP 2.1 TITLE	··· •	Change Addition
NAME	GOMEZ, JESUS M.	_	2 2 NAME		
STREET ADDRESS	1731 SW 98 AVENUE MIAMI FL		2 3 STREET ADDRESS		
CITY-ST-ZIP TITLE	PD		2 4 CHY-ST-ZIP 3.1 TITLE		Change Addition
NAME	HERNANDEZ, JUAN		3 2 NAME		
STREET ADORESS CITY - ST - ZIP	11944 SW 127 CT. MIAMI FL		3.3 STREET ADDRESS 3.4. CITY - ST - ZIP		
THTLE	VD	DELETE	4.1 TITLE		🗌 Change 🔲 Addition
NAME	CRISTOBAL, HELIN		4 2 NAME		
STREET ADDRESS	7305 SW 132 CT. MIAMI FL		4 3 STREET ADDRESS		
CITY - ST - ZIP TITLE		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE	······································	Change Addition
NAME			52 NAME		
STREET ADDRESS CITY - ST - ZIP			5 3 STREET ADDRESS		
TATLE	· · · · ·	DEFELE	54 CITY-ST-ZIP 61 TITLE		Change 🔲 Addition
NAME			6 2 NAME		
STREET ADDRESS		$\sim$	6 3 STREET ADDRESS		
CITY-ST-ZIP 14. 1 do hereb	L by certify that the information supplied	with this fling is voluntarily fur	64 CITY-ST-ZIP hished and does not qualify fe	or the exemption stated in Section 119.0	7(3)(k), Florida Statutes. I further
oath; that	I am an officer or director of the corp	oration or the receiver or truste	e empowered to execute this	te and that my signature shall have the s s report as required by Chapter 617, Flo	same legal effect as if made under rida Statutes; and that my name
appears in	h Block 12 or Block 13 if changed, or	on an attacement with an add	ress	alilar	305)876.8444
SIGNAT	URE:	NATUR		) 11/10 (	2~0)8 16.8444CL

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