FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

FILED

Mar 18 1997 8:00am

Secretary of State

12/91 (305) 3/4-1400

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT #

1. Corporation Name

N29666

IGLESIA BAUTISTA REDENCION, INC.

IGLEON	TOMOTION ILEGATION					
Principal Place of Business		Mailing Address			{ 	
5859 S.W. 16TH STREET MIAMI FL 33155-2104		5859 S.W. 16TH STREET MIAMI FL 33155-2104				
:					3. Date Incorporated or Qualified 12/12/1988	3a. Date of Last Report 04/15/1996
2. Principal Place of Business		2a. Mailing Address		4. FEI Number 65-0114902	Applied For	
21		Suite, Apt. #, etc.		03-0114902	Not Applicable \$8.75 Additional	
Suite, Apt. #, etc.		27		5. Certificate of Status Desired	Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28		Trust Fund Contribution	Added to Fees	
Zip Country		Zιp	Zip Country		8. This corporation has liability for intangible tax under s. 199.032.	
24	25 29 30		0		Florida Statutes Yes No 10, Name and Address of New Registered Agent	
	9. Name and Address of Current	Registered Agent	81	 Name	10. Name and Address of New Re	gistered Agent
DIAZ, TOMAS REV.			82	Street Addr	ess (P.O. Box Number is Not Acceptab	olo)
5122 S.W. 5TH TERRACE MIAMI FL 33134			83			
MINDINI CI	L 33134					85 Zin Code
			84	City		FL
11. Pursuant office or r agent. I a SIGNATURE	to the provisions of Sections 617,050/ egistered agent or both, in the State in funding with, and accept the obligations with a second section of the sectio	119	_		oration submits this statement for the pion's board of directors. I hereby accepted when reinstaling)	ourpose of changing its registered of the appointment as registered but th
12.	OFFICERS AND		13.	,	ADDITIONS/CHANGES TO OFFIC	DERS AND DIRECTORS IN 12
TITLE	PD	☐ DELETE	1.1 TUTLE			Change Addition
NAME	DIAZ, TOMAS REV.		1.2 NAME			
STREET ADDRESS	5122 S.W. 5TH TERRACE		1.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33134	DELETE	2.1 TITLE			Change Addition
TITLE NAME	VD Consuegra, Hector		2.2 NAME			Citaligo C.1 Abbiton
STREET ADDRESS	2525 S.W. 24TH COURT		2.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33145		2. 4 CITY - S1 - ZIP			
TITLE	TD	☐ DELETE	3.1 TITLE			Change Addition
NAME	SABINA, OSVALDO		3.2 NAME			1
STREET ADDRESS	10200 S.W. 19TH STREET		3.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33165		3.4. Cf1Y - S1 - 7IP			Change Addition
TITLE	VT	☐ DELETE	4.1 TILLE			Change L Addition
NAME	TOIRAC, ONTONIEL 1201 S.W. 22ND COURT		4. 2 NAME 4.3 STREET ADDRESS			
STREET ADDRESS	MIAMI FL 33165					
CITY+S1-ZIP TITLE	SD SD	DELFTE	4.4 C(IY-SI-Z(P)			Change Addition
NAME	AREVALO, NELISA	<u> </u>	5.2 NAME			!
STREET ADDRESS	11125 S.W. 56TH STREET		5.3 STREET ADDRESS			ţ
CITY-ST-ZIP	MIAMI FL 33165		5.4 CHY-S1-ZIP			
TITLE	AS	DELETE	6.1 1)TLF			Change Addition
NAME	GUIARDINU, ELIAS		6.2 NAME			
STREET ADDRESS	8615 N.W. 8TH STREET, #21	4	6.3 STREET	ADORESS		
CITY-ST-ZIP	MIAMI FL 33172		6.4 CBY- S	1 - ZIP		

14. If 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 supp'emental 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 trusted 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.