

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 APR 24 AM 8:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N32724 (9)

1. Corporation Name

MOVIMIENTO CRISTIANO CRISTO ES DIOS, CORPORATION

Principal Place of Business

**3321 MORNING SIDE
KISSIMMEE FL 32743**

Mailing Address

**3321 MORNING SIDE
KISSIMMEE FL 32743**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/08/1989

3a. Date of Last Report

04/14/1994

4. FEI Number

59-2946140

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**

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status



**\$68.75 Supplemental
Fee Not Required**

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



Yes



No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

**RIO, MIGUEL A.
3321 MORNING SIDE
KISSIMMEE FL 32743**

10. Name and Address of New Registered Agent

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

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

NOTE: Registered Agent signature required when resigning

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**DP
RIO, MIGUEL A.
3321 MORNING SIDE
KISSIMMEE FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**DV
EFFRAIN, BURGOS
3321 MORNING SIDE DR
KISSIMMEE FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**DS
IRAIDA, NAVARRO
3321 MORNING SIDE
KISSIMMEE FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**DT
ZAYAS, ROSA M
3321 MORNING SIDE
KISSIMMEE FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**D
VILLANUEVA, FRANCISCO
3321 MORNING SIDE
KISSIMMEE FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

☐ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

☒ Change ☐ Addition

**IRAIDA NAVARRO Vice Pres.
3321 MORNING SIDE DR
KISSIMMEE FL 32743**

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

☒ Change ☐ Addition

**Nilda Rubert Secretary
3321 MORNING SIDE DR
KISSIMMEE FL 32743**

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

☒ Change ☐ Addition

**FRANCISCO RUBIO Treasurer
3321 MORNING SIDE DR
KISSIMMEE FL 32743**

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

☒ Change ☐ Addition

**JESUS SANTANA D.
3321 MORNING SIDE DR
KISSIMMEE FL 32743**

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

Miguel A. Rio Miguel A. Rio Pres.

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR

4/18/95 886123P

DATE

DATE/TIME

NB2724

**IRAIDA NAVARRO -VICE PRES.
3321 MORNINGSIDE DR.
KISSIMMEE, FL. 34743**

**NILDA RUBERT -SECRETARY
3321 MORNINGSIDE DR.
KISSIMMEE FLA.34743**

**FRANCISCO RIVERA - TREASURERS
3321 MORNINGSIDE DR.
KISSIMMEE FLA.34743**

**JESUS SANTIAGO -D
3321 MORNINGSIDE DR.
KISSIMMEE FLA.34743**