FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT 1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 22 AM 11:15

DOCUMENT # N34988 (8)

1. Corporation Name

MINISTERIOS EL BUEN PASTOR, INC.

Principal Place of Business	Mailing Address
%HECTOR E. LORA P. O. BOX 350-1422 MIAMI FL 33135	%HECTOR E. LORA P. O. BOX 350-1422 MIAMI FL 33135

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/31/1989
3a. Date of Last Report: 02/22/1994
4. FEI Number: 65-0223564 — Applied For / Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 2850 S.W. 27 Ave.	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 Miami, Florida	City & State 28
Zip 24 33133 — Country 25 USA	Zip 29 — Country 30

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

9. Name and Address of Current Registered Agent

LORA, HECTOR E.
380 RIDGEWOOD ROAD
KEY BISCAYNE FL 33149

10. Name and Address of New Registered Agent

81 Name: Olga L. Gonzalez
82 Street Address (P.O. Box Number is Not Acceptable): 1101 Scarborough Dr.
83
84 City: Davie — FL — 85 Zip Code: 33324

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: Olga L. Gonzalez — Signature, typed or printed name of registered agent and title if applicable — (NOTE: Registered Agent signature required when reinstating) — DATE: February 15, 1995

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
DP	RODRIGUEZ, LIDIA	9981 NW 51ST LANE	MIAMI FL
DS	ENTRALGO, ALINA	6470 NW 192 TERR.	MIAMI FL
D	NEWSOME,MAGDANILE	10008 NS 52ND TERR.	MIAMI FL
DT	GONZALEZ, MARIA DOLORES	9867 NW 52 TERRACE	MIAMI FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

No.	Change	Addition	Title	Name	Street Address	City-St-Zip
1	☐	☐				
2	XX	☐		Hector Rivera	15051 S.W. 103 Ln. #4107	Miami, Fl. 33196
3	XX	☐		Julio Gonzalez	1101 Scarborough Dr.	Davie, Fl. 33324
4	☐	☐				
5	☐	☐				
6	☐	☐				

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: Maria Dolores Gonzalez — MARIA DOLORES GONZALEZ — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Feb. 15, 1995 (Date) — 446-5549 (Daytime Phone #)

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