

FILE NOW: FILING FEE IS \$61.25

FILED  
Jan 23 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # N35120 (7)  
1. Corporation Name  
PRIMERA IGLESIA CRISTIANA DISCIPULOS DE CRISTO D E MIAMI, CORP.



Principal Place of Business Mailing Address  
11990 SW 56TH STREET MIAMI FL 33183  
P.O. BOX 830786 MIAMI FL 33183

3. Date Incorporated or Qualified  
11/08/1989  
4. FEI Number  
05-1326192  
Applied For  
Not Applicable

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  
24 25 29 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. Is this nonprofit corporation a homeowners association?  Yes  No  
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No

9. Name and Address of Current Registered Agent  
ESTRADA, HECTOR M  
10461 SW 125TH AVE  
MIAMI FL 33186

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 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 Hector M. Estrada (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD DEL VALLE, ROBERTO	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	11830 SW 100TH TERRACE	1.2 NAME	
STREET ADDRESS	MIAMI FL 33186	1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	VD MORALES, SIXTO	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	15024 SW 130TH COURT	2.2 NAME	VP Sanchez, LILIANA
STREET ADDRESS	MIAMI FL 33186	2.3 STREET ADDRESS	14521 S.W. 108 TERRACE
CITY-ST-ZIP		2.4 CITY-ST-ZIP	MIAMI, FL 33177
TITLE	SD ABOTT, GIANNA	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	8500 SW 133RD AVE., #106	3.2 NAME	SD ARIAS, JORGE
STREET ADDRESS	MIAMI FL 33183	3.3 STREET ADDRESS	2430 S.W. 107 AVE
CITY-ST-ZIP		3.4 CITY-ST-ZIP	MIAMI, FL 33175
TITLE	TD ROBLES, JOSEPH R	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	30323 SW 149TH COURT	4.2 NAME	TD Rodriguez, HERBERT
STREET ADDRESS	LEISURE CITY FL 33033	4.3 STREET ADDRESS	10076 S.W. 156 AVE
CITY-ST-ZIP		4.4 CITY-ST-ZIP	MIAMI, FL 33196
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I 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.

SIGNATURE: [Signature] 11/08/1989

CR2E037 (10/97)