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FILED
May 14 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N36777 (3)

1. Corporation Name
IGLESIA CRISTIANA AMOR, INC.



Principal Place of Business 10855 SW 26 ST MIAMI FL 33165 US	Mailing Address 10855 SW 26TH ST MIAMI FL 33165 US
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3. Date Incorporated or Qualified 02/26/1990
4. FEI Number 65-0176037
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Zip 29	Country 30

9. Name and Address of Current Registered Agent

**EARNEST, JAMES H.
2625 PONCE DE LEON BLVD.
CORAL GABLES FL 33134**

10. Name and Address of New Registered Agent

81 Name PEDRO A. MARTINEZ
82 Street Address (P.O. Box Number is Not Acceptable) 1241 SW 143 AVENUE
83
84 City Miami FL 85 Zip Code 33184

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 617.0502, Florida Statutes.

SIGNATURE **PEDRO A. MARTINEZ** *Pedro A. Martinez* DATE **4/28/98**

12. OFFICERS AND DIRECTORS

TITLE PD	NAME MARTINEZ, PEDRO A.	STREET ADDRESS 1241 SW 143RD AVE.	CITY-ST-ZIP MIAMI FL	<input type="checkbox"/> DELETE
TITLE VD	NAME PRAT, OSCAR	STREET ADDRESS 1240 SW 142ND AVENUE	CITY-ST-ZIP MIAMI FL	<input checked="" type="checkbox"/> DELETE
TITLE SD	NAME ALAM, MARIA H	STREET ADDRESS 4751 SW 127 CT.	CITY-ST-ZIP MIAMI FL 33175	<input checked="" type="checkbox"/> DELETE
TITLE 	NAME 	STREET ADDRESS 	CITY-ST-ZIP 	<input type="checkbox"/> DELETE
TITLE 	NAME 	STREET ADDRESS 	CITY-ST-ZIP 	<input type="checkbox"/> DELETE
TITLE 	NAME 	STREET ADDRESS 	CITY-ST-ZIP 	<input type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 	1.2 NAME 	1.3 STREET ADDRESS 	1.4 CITY-ST-ZIP Miami, FL 33184	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.1 TITLE VD	2.2 NAME ALAM, MARIA H.	2.3 STREET ADDRESS 4751 SW 127 CT.	2.4 CITY-ST-ZIP Miami, FL 33175	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.1 TITLE TD	3.2 NAME GRAFFE, ALBERTO	3.3 STREET ADDRESS 11027 SW 88 ST. #0-203	3.4 CITY-ST-ZIP Miami, FL 33176	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.1 TITLE SD	4.2 NAME ORDONEZ, EDGAR R.	4.3 STREET ADDRESS 11025 SW 25 ST.	4.4 CITY-ST-ZIP Miami, FL 33165	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.1 TITLE 	5.2 NAME 	5.3 STREET ADDRESS 	5.4 CITY-ST-ZIP 	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.1 TITLE 	6.2 NAME 	6.3 STREET ADDRESS 	6.4 CITY-ST-ZIP 	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: **PEDRO A. MARTINEZ** *Pedro A. Martinez* DATE **4/28/98** 305-220-2467

CR2E037 (1097)