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NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Sep 22 1997 8:00am

Secretary of State

27

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

Principal Place of Business

50 W 29TH ST

N37672

(5)

Mailing Address

3200 NW 79 ST

MINISTERIO EVANGELICO INTERNACIONAL DE LA IGLESI A DE CRISTO, INC.

BAY A W2230 MIAMI FL 33147-4647 HIALEAH FL 33010 3a. Date of Last Report 06/05/1996 3. Date Incorporated or Qualified US HS 04/13/1990 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address 65-0188928 3200 HW Not Applicable 21 \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State \$5.00 May Be City & State 6. Election Campaign Financing Trust Fund Contribution Added to Fees MIAMI 23 28 Country 8. This corporation has liability for intangible tax under s. 199.032, Yes 🔣 No 30 Florida Statutes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name OBANDO, OSCAR D Street Address (P.O. Box Number is Not Acceptable) 82 19943 NW 62 PL 83 **MIAMI FL 33015** 84 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 and tile if applicable (NO)1E Registered Agent signature required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change Addition DELETE PD 1.1 TITLE TITLE OBANDO, OSCAR D 1.2 NAME NAME 19943 NW 62 PL. 1.3 STREET ADDRESS STREET ADDRESS MIAMI FL 33015 1.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 21 TITLE TITLE PINEDA. YOLANDA 22 NAME NAME 5150 W. 12 AVE. APT. 397 23 STREET ADDRESS STREET ADDRESS HIALEAH FL 33012 CITY-ST-ZIP 2.4 CITY - ST - ZIP Change Addition DELETE 3.1 TITLE TITLE NAME CAMPOZ, FRANCISCA 3.2 NAME 3200 NW 79 ST. W2230 3.3 STREET ADDRESS STREET ADDRESS MIAMI FL 33147 CITY-ST-ZIP 3.4. CITY-ST-ZIP Addition Change DELETE 4.1 TITLE TITLE PEREZ, VICTOR M 4. 2 NAME NAME 3200 NW 79TH ST W2230 4.3 STREET ADDRESS STREET ADDRESS MIAMI FL CITY-ST-ZIP 4.4 CITY - ST - ZIP Change Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP Change Addition DELETE 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY - ST - ZIP 14. I 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 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 aliachment with an address.