FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 16 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

N40622

(5)

IGLESIA CASA DE ADORACION & ALABANZA, INC.

	TORSA DE ADORACION O					
Principal Place	of Business	Mailing Address			1 14011/E: 411 0/E11 E11/E SILVE NOTE	ifft bidis grifit ffebri fildiz alası fildir iddi.
P O BOX 59209 1743 BENTWAY ORLANDO FL 3	COURT	P O BOX 592095 ORLANDO FL 32859-2095 US				
US					3. Date Incorporated or Qualified 10/11/1990	3a. Date of Last Report 05/15/1996
Principal Place of Business 21		2a. Mailing Address 26		4. FEI Number 59-3055781	Applied For Not Applicable	
Suite, Apt #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be	
Zip Country 25		Zip 29	Zip Country		8. This corporation has liability for Intangible tax under s. 199.032, Florida Statutes Yes No	
[24]	g, Name and Address of Currer		1001	······································	10. Name and Address of New Reg	
			1	11 Name		
COLON, RAYMOND			-	82 Street Address (P.O. Box Number is Not Acceptable)		
	ntway court o,f l 32818		}	13		
OnDate	0,1 1 02010			14 City		85 Zip Code
						FL
11. Pursuant to the provisions of Sections 617.0502 and 617.0508, 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						
OIGHT TOTAL	Signature, typed or printed name of registered ag		TE: Registered	Agent signature requ	ired when reinstating)	DATE
12.		ID DIRECTORS	13.	<u> </u>	ADDITIONS/CHANGES TO OFFIC	
Trille	DP	☐ DELETE	1.1 TITI			Change
NAME	COLON, RAYMOND		1.2 NA			
STREET ADDRESS	1743 BENT WAY COURT		8	EET ADDRESS		
CITY-ST-ZIP TITLE	ORLANDO FL DV	DELETE	2.1 TITE	r-ST-ZIP		Change Addition
ļ			2.2 NAJ		e e	E Oldrigh E Madelon
NAME Street address	1743 BENT WAY COURT		2.3 STREET ADDRESS			
CITY-ST-ZIP	ORLANDO FL			Y-ST-ZIP		
TITLE	DST	DELETE	3.1 TITI			☐ Change ☐ Addition
NAME	VELAZQUEZ, FEDERICO		3.2 NA			_ · _
STREET ADDRESS	5226 VIA HACIENDA CIRCLE	<u> </u>		EET ADDRESS		
CITY-SI-ZIP	ORLANDO FL		1	Y-ST-ZIP		
TITLE	D	DELETE	4.1 TITI			Change Addition
NAME	RAMOS, RAMON		4.2 NA	ME		
STREET ADDRESS	135 COOPER COURT		4.3 STF	EET ADDRESS		
CITY-ST-ZIP	ORLANDO FL			(-ST-ZIP		
TITLE	D	☐ DELETE	5.1 TITI			☐ Change ☐ Addition
NAME	GRTIZ, ORLANDO		5.2 NAJ			
STREET ADDRESS	3943 PINTAIL COURT			EET ADORESS		
CITY-ST-ZIP	ORLANDO FL	DELETE		r-ST-ZIP		Change Addition
TITLE			6.1 T(T)			La onango Lag nauton
NAME CIDEET ANODECE			6.2 NAJ			
STREET ADDRESS				EET ADDRESS /-ST-ZIP		
14. I do hereb	y certify that the information supplie	ed with this filing does not qua	lify for the s	xemption state	d 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: Chialitto alla La Colon 4/27/97 240-37-12