

FILE NOW: FILING FEE IS \$61.25

FILED
May 12 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 # **N42762** (7)

1. Corporation Name

SPANISH CHURCH OF GOD OF HIALEAH, INC.

Principal Place of Business

Mailing Address

**2580 W 2ND AVE
HIALEAH FL 33010
US**

**% JESUS EXPOSITO
POST OFFICE BOX 3143
HIALEAH FL 33013-0143**



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

3. Date Incorporated or Qualified	Applied For
04/01/1991	Not Applicable
4. FEI Number	
65-0256903	
5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	<input checked="" type="checkbox"/> \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent
EXPOSITO, JESUS EXPOSITO, JESUS 4500 W 16TH STREET, 212-A HIALEAH FL 33012

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)


DATE

12. OFFICERS AND DIRECTORS	
TITLE	<input type="checkbox"/> DELETE
NAME	D EXPOSITO, JESUS
STREET ADDRESS	4500 W 16TH AVE 212A
CITY-ST-ZIP	HIALEAH FL
TITLE	<input type="checkbox"/> DELETE
NAME	D EXPOSITO, MARIA C.
STREET ADDRESS	4500 W 16TH AVE 212A
CITY-ST-ZIP	HIALEAH FL
TITLE	<input type="checkbox"/> DELETE
NAME	D DEFRANCISCO, ALEJANDRO
STREET ADDRESS	7471 NW 16TH TERRACE
CITY-ST-ZIP	HIALEAH FL
TITLE	<input checked="" type="checkbox"/> DELETE
NAME	D AGUILAR, PEDRO A
STREET ADDRESS	6055 W 19 AVE #317
CITY-ST-ZIP	HIALEAH FL
TITLE	<input checked="" type="checkbox"/> DELETE
NAME	D JARQUIN, CARLOS
STREET ADDRESS	12901 NW 99 CT
CITY-ST-ZIP	HIALEAH GARDEN FL
TITLE	<input type="checkbox"/> DELETE
NAME	D DE FRANCISCO, CARMEN
STREET ADDRESS	7471 NW 16TH TERRACE
CITY-ST-ZIP	HIALEAH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
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:



Jesus Exposito

04/30/98 305-823-6842

CR2E037 (10/97)