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FILED
Apr 18 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997	 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N43744**
 1. Corporation Name
FIRST SPANISH CHURCH OF THE OPEN BIBLE, INC.

Principal Place of Business 490 EAST 50TH Street HIALEAH, FL 33013	Mailing Address 490 EAST 50TH STREET HIALEAH FL 33013-1541
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2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified 06/07/1991	3a. Date of Last Report 01/25/1996
21. Suite, Apt #, etc.	26. Suite, Apt #, etc.	4. FEI Number 65-0005650	Applied For <input type="checkbox"/> Not Applicable
22. City & State	27. City & State	5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
23. Zip	28. Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24. Country	29. Country	30. Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent CAJIGAS, RALPH A. 3540 WEST 1ST AVENUE HIALEAH FL 33012	10. Name and Address of New Registered Agent
81. Name	82. Street Address (P.O. Box Number is Not Acceptable)
83. City	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: **RALPH A. CAJIGAS - PASTOR** DATE: **04/07/97**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GUERRERO, MANUEL	1.2 NAME	
STREET ADDRESS	4424 8TH COURT	1.3 STREET ADDRESS	
CITY-ST-ZIP	HIALEAH FL 33013	1.4 CITY-ST-ZIP	
TITLE	<input checked="" type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	AROCHO, EFREN	2.2 NAME	IDELFONSO HERNANDEZ
STREET ADDRESS	1410 N.E. 200TH TERRACE	2.3 STREET ADDRESS	415 E. 40TH STREET
CITY-ST-ZIP	NORTH MIAMI FL 33179	2.4 CITY-ST-ZIP	HIALEAH FL 33013
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RAMIREZ, WILLIAM	3.2 NAME	40000210997
STREET ADDRESS	13910 APPALACHIAN TRAIL	3.3 STREET ADDRESS	-04/21/97--0433-044
CITY-ST-ZIP	DAVIE FL 33325	3.4 CITY-ST-ZIP	***70.00
TITLE	<input checked="" type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MARTIN, JUAN	4.2 NAME	AURELIO ROMAN
STREET ADDRESS	7101 W. 24TH AVENUE	4.3 STREET ADDRESS	17340 N.W. 31ST AVENUE
CITY-ST-ZIP	HIALEAH FL 33016	4.4 CITY-ST-ZIP	OPA-LOCKA FL 33056
TITLE	<input checked="" type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ESCALANTE, RAUL	5.2 NAME	JUANA SOTOLONGO
STREET ADDRESS	3969 WEST 9TH COURT	5.3 STREET ADDRESS	5461 W. 27TH COURT
CITY-ST-ZIP	HIALEAH FL 33012	5.4 CITY-ST-ZIP	HIALEAH FL 33016
TITLE	<input checked="" type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	FIGUEROA, EDGAR	6.2 NAME	JIMMY TAVAREZ
STREET ADDRESS	340 DOUGLAS ROAD, APT. 5	6.3 STREET ADDRESS	12515 S.W. 7TH PLACE
CITY-ST-ZIP	OPA-LOCKA FL 33054	6.4 CITY-ST-ZIP	DAVIE FL 33325

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 attachment with an address.

SIGNATURE: **Ralph A. Cajigas - Pastor** DATE: **04/07/97** DAYTIME PHONE #: **(305) 688-0713**

CR2E037 (9/96)