2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # N43794

1. Erffity Name

FIRST SPANISH CHURCH OF THE OPEN BIBLE, INC.



FILED Jan 09, 2006 08:00 AM Secretary of State

Principal Place of Business

490 EAST 50TH STREET HIALEAH, FL 33013

Mailing Address

490 EAST 50TH STREET HIALEAH, FL 33013



01062006 No Chg-NP

CR2E037 (11/05)

4. FE! Number **65-0005650**

Applied For Not Applicable

5. Certificate of Status Desired

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\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CAJIGAS, RALPH A. 3540 WEST 1ST AVENUE HIALEAH, FL 33012

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| SIGNATURE Signature typed or artified name of registered agent and bill if applicable (NOTE Registered Agent tignature recurred when refinationg) DATE | | named entity submits this statement for the lions of registered agent. | purpose of changing its registered of | fice or r | egistered agent, or bo | th, in the State of Florida. I am familiar with, and accept |
|---|---------------------------------------|--|---------------------------------------|-------------|------------------------------|---|
| 10. OFFICERS AND DIRECTORS 10. OFFICERS AND DIRECTORS 11. | SIGNATURE. | | e if applicable (NOTE Registered Ager | n signature | a required when reinstating) | DATE |
| TITLE NAME GUERRERO, MANUEL 4424 8TH COURT HALEAH, FL 33013 TITLE D HERNANDEZ, IDELFONSO 415 E. 40TH STREET HIALEAH, FL 33013 TITLE D MARKE HIALEAH, FL 33016 TITLE D MARKE STREET ADDRESS CITY-ST-ZIP HIALEAH, FL 33016 TITLE D DOMINGUEZ, ARMANDO 2618 WEST 64TH STREET HIALEAH, FL 33016 | , | | | | | |
| NAME STREET ADDRESS CITY-ST-ZIP HIALEAH, FL 33013 TITLE D | 10. | OFFICERS AND DIRE | ECTORS | | | · |
| NAME HERNANDEZ, IDELFONSO STREET ADDRESS CITY-ST-ZIP HIALEAH, FL 33013 IVILE D MARTIN, JUAN STREET ADDRESS CITY-ST-ZIP HIALEAH, FL 33016 DO NOT WRITE INTLE D MONTHS SPACE INTLE D MONTHS SPACE INTLE D MONTHS SPACE STREET ADDRESS CITY-ST-ZIP HIALEAH, FL 33016 | NAME STREET ADDRESS | GUERRERO, MANUEL 4424 8TH COURT | | | | |
| NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME DOMINGUEZ, ARMANDO STREET ADDRESS CITY-ST-ZIP HIALEAH, FL 33016 DOMINGUEZ, ARMANDO STREET ADDRESS CITY-ST-ZIP HIALEAH, FL 33016 DOMINGUEZ, ARMANDO STREET ADDRESS CITY-ST-ZIP HIALEAH, FL 33016 | NAME STREET ADDRESS | HERNANDEZ, IDELFONSO 415 E. 40TH STREET | | • | | U00000381513 01/11/06-80057-013 70.00 |
| NAME DOMINGUEZ, ARMANDO STREET ADDRESS CITY-ST-ZIP HIALEAH, FL 33016 | NAME STREET ADDRESS | MARTIN, JUAN 7101 WEST 24TH AVE | | | DO | NOT WRITE |
| TITLE D | NAME STREET ADDRESS | DOMINGUEZ, ARMANDO 2618 WEST 64TH STREET | | | IN ' | THIS SPACE |
| NAME TAVAREZ, JIMMY STREET ADDRESS CITY-ST-2IP DAVIE, FL | NAME STREET ADDRESS | 12515 SW 7TH PLACE | | | | |
| TITLE PP NAME CAJIGAS, RALPH A STREET ADDRESS CITY-ST-ZIP HIALEAH, FL 33012 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes, I further certify that the information | NAME STREET ADDRESS CITY-ST-ZIP | CAJIGAS, RALPH A 3540 W. 1ST AVE. HIALEAH, FL 33012 | | | | |

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes, I further certify that the information indicated on this report or supplemental 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 occiporation or the receiver or trustee empowered to execute this report as required by Chapter 617. Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

Ralph A. Cajigas-Pastor 1/6/06

305-688-0713

Daytime Phone #