


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 26, 2007 08:00 AM
Secretary of State

DOCUMENT # N43794 1. Entity 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
---	---



2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
---	---

1st MOORE CR2E037 (10/06)

City & State Zip Country	City & State Zip Country
----------------------------------	----------------------------------

4. FEI Number 65-0005650	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent CAJIGAS, RALPH A. 3540 WEST 1ST AVENUE HIALEAH FL 33012	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
--	--

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

**FILE NOW: FEE IS \$61.25
Due By May 1, 2007**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS		<input type="checkbox"/> Delete
TITLE	T GUERRERO, MANUEL	<input type="checkbox"/>
STREET ADDRESS	4424 8TH COURT	
CITY- ST- ZIP	HIALEAH FL 33013	
TITLE	D HERNANDEZ, IDELFONSO	<input type="checkbox"/>
STREET ADDRESS	415 E. 40TH STREET	
CITY- ST- ZIP	HIALEAH FL 33013	
TITLE	D MARTIN, JULIAN	<input type="checkbox"/>
STREET ADDRESS	7101 WEST 24TH AVE	
CITY- ST- ZIP	HIALEAH FL 33016	
TITLE	D DOMINGUEZ, ARMANDO	<input checked="" type="checkbox"/>
STREET ADDRESS	2618 WEST 64TH STREET	
CITY- ST- ZIP	HIALEAH FL 33016	
TITLE	D TAVAREZ, JIMMY	<input type="checkbox"/>
STREET ADDRESS	12515 SW 7TH PLACE	
CITY- ST- ZIP	DAVIE FL	
TITLE	PP CAJIGAS, RALPH A	<input type="checkbox"/>
STREET ADDRESS	3540 W. 1ST AVE.	
CITY- ST- ZIP	HIALEAH FL 33012	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
TITLE	NAME		
STREET ADDRESS	100000680376		
CITY- ST- ZIP	04/03/07-80075-016 70.00		
TITLE	NAME	<input type="checkbox"/>	<input type="checkbox"/>
STREET ADDRESS	STREET ADDRESS		
CITY- ST- ZIP	CITY- ST- ZIP		
TITLE	NAME	<input type="checkbox"/>	<input type="checkbox"/>
STREET ADDRESS	STREET ADDRESS		
CITY- ST- ZIP	CITY- ST- ZIP		
TITLE	NAME	<input type="checkbox"/>	<input type="checkbox"/>
STREET ADDRESS	STREET ADDRESS		
CITY- ST- ZIP	CITY- ST- ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Ralph A. Cajigas* **Ralph A. Cajigas Senior Pastor** 3/23/07 305-688-0713