Applied For

\$8.75 Additional

Not Applicable

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # N44062

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

IGLESIA CRISTIANA EL NUEVO PACTO, INC.

Principal Place of Business	Mailing Address
29 THERESA RD.	% ESTHER GONZALEZ
IPA FL 33615	14918 GREELEY DR.
3	TAMPA FL 33625

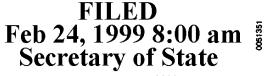
2a. Mailing Address

City & State

Suite, Apt. #, etc.

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02-24-1999 90017 021 ****61.25

3. Date Incorporated or Qualifed

5. Certifcate of Status Desired

06/24/1991

59-3074743

FEI Number

23		28								- Required	
Zip	Country	Zip	Cou	ntry		6. Election Cam	npaign Financing	' _	•	00 May Be	
4	25	29	30			Trust Fund C				ed to Fees	
	9. Name and Address of Current	Registered Agent		L.,		10. Name and A	ddress of New	Registered A	gent		
				81	Name						
GONZALEZ	z, esther			82	Street Addres	s (P.O. Box Numb	per is Not Accep	table)			\neg
14918 GRE	· ·										-
TAMPA FL	33625			83							
				84	City	85 Zi				Zip Code	一
								<u> </u>	بلل		
office or rea	o the provisions of Sections 617.0502 gistered agent, or both, in the State of n familiar with, and accept the obligation	Florida. Such change	was authorized	l by t	-named corpor he corporation	ration submits this 's board of director	statement for the rs. I hereby acce	e purpose of o	tment a	g its registere s registered	на
SIGNATURE _		(min 16 15 1-)	ALOYE, B	A1		then refrestation)		DATE			Ì
<u>12.</u>	Signature, typed or printed name of registered agent a OFFICERS AND		(NOTE: Registered	Agent	signature required v		HANGES TO O		D DIRE	CTORS IN 12	2
	DP OFFICERS AND	DIRECTORO DELI		īLE	· ···				☐ Cha		
	GONZALEZ, ESTHER		1.2 NA	WE							
	14918 GREELEY DR.				ADDRESS						
	TAMPA FL			TY-ST	.7IP						
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	5 ELM ST.		2.3 \$1	REET	ADDRESS -	1901 1	Toute ma	<i>~~~</i>	1 /6	, ,	ĺ
	TAMPA FL		2.4 C	ITY-ST	·zip	tampa	FI.				
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NAME	GONZALEZ, ALBA		3.2 N	ME							1
STREET ADDRESS	14918 GREELEY DR.		3.3 \$7	REET	ADDRESS						
CITY-ST-ZIP	TAMPA FL			ITY-ST	· ZIP						
TITLE	DSQ	☐ DELI	TE 4.1 TT	ΠE					☐ Cha	nge 🔲 Add	lition
NAME	SOTOMAYOR, LVETTE		4.2N	AME)
	15004 GREELEY DR.		4.3 81	REET	ADDRESS						1
CITY-ST-ZIP	TAMPA FL			TY-ST	-ZIP					nge ∏Ado	dition
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NAME			5.2 N		4000000						
STREET ADDRESS					ADDRESS 74D						
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NAME					ADDRESS						
STREET ADDRESS				TY-ST							İ
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indicated on this annual report or supplied with this limit does not qualify for the exemption stated in Section 1.19.07(3)(f), Fronta Statutes, Fronta Grantier Certify that the information indicated on this annual report or suppliemental 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, with all other like empowered.

SIGNATURE:

963-7786