

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N46438** (0)
1. Corporation Name
CENTRO BIBILICO INTERNACIONAL DE HIALEAH A/G, IN C.



Principal Place of Business
**7342 W 20 AVE
HIALEAH FL 33016**

Mailing Address
**7342 W. 20TH AVE.
HIALEAH FL 33016
US**

3. Date Incorporated or Qualified
12/13/1991

3a. Date of Last Report
03/31/1995

2. Principal Place of Business
21

2a. Mailing Address
26

4. FEI Number
65-0309138

Applied For
☐ Not Applicable

Suite Apt. #, etc.
22

Suite, Apt. #, etc.
27

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

City & State
23

City & State
28

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

Zip
24

Country
25

Zip
29

Country
30

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**GARCIA, PEDRO
2740 W. 63RD ST.
APT. 107
HIALEAH FL 33016**

81 Name
BORIS ACOSTA

82 Street Address (P.O. Box Number is Not Acceptable)
6755 NW 169 St. Unidad C

83

84 City
HIALEAH

85 Zip Code
FL 33015

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

Boris Acosta

(NOTE: Registered Agent signature required when not stating)

May 8/96

12. OFFICERS AND DIRECTORS

| TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP | DELETE |
|-------|---------------|--------------------------|-------------|--------------------------|
| PD | GARCIA, PEDRO | % 2740 WEST 63RD ST #107 | HIALEAH FL | <input type="checkbox"/> |
| SD | GOMEZ, RAFAEL | % 2740 WEST 63RD ST #107 | HIALEAH FL | <input type="checkbox"/> |
| TD | IBARRA, NURY | % 2740 WEST 63RD ST #107 | HIALEAH FL | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| 11 TITLE | 12 NAME | 13 STREET ADDRESS | 14 CITY-ST-ZIP | 15 |
|----------|--------------|-------------------------|------------------|---|
| PD | ACOSTA BORIS | 6755 NW 169 ST Unidad C | Miami, FL. 33015 | <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| VP | GARCIA PEDRO | 2740 WEST 63RD #107 | HIALEAH FL. | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| | | | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| | | | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| | | | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| | | | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: *Boris Acosta*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ABRIL 23/96

Date

Daytime Phone

CR2E037 (12/95)

26/96