FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT #
1. Corporation Name

IGLESIA RALITISTA HISPANA EL REDENTOR, INC.

IGEEO	A DAUTIOTA HIOTANA EE H	EDERTOII, IIIO								
Principal Place	e of Business	Mailing Address					[ALI DUN DIRA	BHBH DIBH BIAN D	HOH DIEH IDEI
331 CLEVELAND ST. CLEARWATER FL 34615		331 CLEVELAND . CLEARWATER FL 34615-4002 US								
						3.	Date Incorporated or Qualifie 01/23/1992	d 3a. [Date of Last R 02/28/19	eport 1 96
— '	lace of Business	2a. Mailing Address				4.	FEI Number 59-3106410			oplied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.				60 7E			ot Applicable Additional	
22		27			5.	Certificate of Status Desired		90.75 / Fee Re		
City & State		City & State			6.	Election Campaign Financing	 J	\$5.00	May Be	
23		26					Trust Fund Contribution		Added t	to Fees
Zip	Country	Zip	Coun	ntry					r intangible tax under s. 199.032,	
24	25 9. Name and Address of Current		30			10	Florida Statutes Name and Address of New		∐ No	
			1	Q I	Name A	0 1		- Indiana	- Agoin	
CARLOS	B, RODRIGUZ * SPELLINA	CHANGE -			<u> </u>	<u>,77114,7</u>	s Rouniauez			
2071 SU	INSET GROVE LN.		'	82 :	Street Ac	address (F	P.O. Box Number is Not Accep	itabiej		
	VATER FL 34625		[4	83		•			······	***************************************
				84 (City				85 Zip (Code
dd Dinasal	to the provisions of Sections 617.0502	C17 1500 Florido Ptotal			-			F		
l office or re	egistered agent, or both, in the State of	of Florida. Such change was a	suthorized	bv th	he corpo	oration's t	board of directors. I hereby ac	cebt the at	or changing it pointment as	registered
	m familiar with, and accept the obligat	lions of, Section 617.0503, Fig	orida Statu	ites.						
SIGNATURE	Signature, typed or printed name of registered agen	and title if applicable. (NOTI	Registered	Agent	signature rei	equired when	n reinstating)	DATE		
12.	OFFICERS AND	DIRECTORS	13.			,	ADDITIONS/CHANGES TO OF	FICERS AN	ID DIRECTOR	IS IN 12
TITLE	D	DELETE	1.1 1(7)	ĻĒ					☐ Change	☐ Addition
NAME	DAVIDIUK, SILAS		1.2 NAME				•			
STREET ADDRESS	1112		1.3 STREET ADDRESS							
CITY-ST-ZIP	CLEARWATER FL		1.4 CIT	Y-51-	21P					
TITLE	D	☐ DELETE	2.1 TITL						L Change	Addition Addition
NAME	RODRIGUEZ, CARLOS		22 NAN							
STREET ADDRESS	2071 SUNSET GROVE LN.			2.3 STREET ADDRESS						
CITY-ST-ZIP	CLEARWATER FL.	T nei ete	2. 4 CITY DELETE 3.1 TITLE		ZIP				Change	Addition
TITLE									CT CHANGE	ריי אמוווטוו
NAME CONTROL	SOMANO, FRANCISCO 1625 LAURA ST.		3.2 NAME		NDDCCC					
STREET ADDRESS	CLEARWATER FL 34816		3.3 STREE							•
CITY-ST-ZIP TITLE	D D	☐ DELETE	3.4. CIT 4.1 TITL		LIF		. 3		Change	Addition
NAME	PINTO, RAQUEL			4. 2 NAME				•	Control of the	
STREET ADDRESS	2084 SANTIAGO WAY		4.3 STREET ADD		IDBECC					
CITY-ST-ZIP	CLEARWATER FL				1					
TITLE	D	DELETE		4.4 CITY - ST - 2 5.1 TITLE					☐ Change	Addition
NAME	GASON, OFELIA	-		5.2 NAME					- -	
STREET ADDRESS	164 GATEWAY DR.		5.3 STREET		DAFSS					
CITY-ST-ZIP	LABOR PI		5.4 CIT		ſ					
TITLE	<u> </u>	DELETE	6.1 TITL		E-TÍ	D			☐ Change	Addition
NAME			6.2 NA		10		OYA , TENESA	A		
STREET ADDRESS					ODRESS 3	520	OYA , TENESA FAINWOOD AUF.	HPT#	169	

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 it changed, or on an attachment with an address. (ANANOUSCO SOMANO JR.)

SIGNATURE:

813-562-2471

FILED

Feb 07 1997 8:00am

Secretary of State