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Feb 06 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # N48215 (0)

1. Corporation Name
IGLESIA BAUTISTA NUEVO AMANECER, INC. MIAMI, FLO
RIDA



Principal Place of Business Mailing Address
6601 N.W. 167TH STREET MIAMI FL 6601 N.W. 167TH STREET MIAMI FL 33015-4206

3. Date Incorporated or Qualified 04/06/1992 3a. Date of Last Report 03/01/1996

2. Principal Place of Business	2a. Mailing Address	4. FEI Number 65-0339144	Applied For
21	26		Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
22	27		
City & State	City & State	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
23	28		
Zip	Country	Zip	Country
24	25	29	30
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		<input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
CARDOSA, DOMINGO 6882 NW 173RD DRIVE APT 807 MIAMI FL 33015		81 Name	
		82 Street Address (P.O. Box Number is Not Acceptable)	
		83	
		84 City	FL 85 Zip Code

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	T <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RIVERO, RUDY	1.2 NAME	
STREET ADDRESS	8320 NW 177TH STREET	1.3 STREET ADDRESS	
CITY-ST-ZIP	PALMS SPRINGS NORTH FL	1.4 CITY-ST-ZIP	
TITLE	TD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SAMPER, LEON W.	2.2 NAME	
STREET ADDRESS	8271 N.W. 185TH STREET	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	2.4 CITY-ST-ZIP	
TITLE	T D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RODRIGUEZ, OCTAVIO	3.2 NAME	
STREET ADDRESS	3214 W 70TH TERRACE	3.3 STREET ADDRESS	
CITY-ST-ZIP	HIALEAH FL	3.4 CITY-ST-ZIP	
TITLE	TD <input checked="" type="checkbox"/> DELETE	4.1 TITLE	TD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CORRALES, JOEL	4.2 NAME	Bryan, Rene
STREET ADDRESS	8261 NW 171ST STREET	4.3 STREET ADDRESS	4471 N.W. 170 Street
CITY-ST-ZIP	MIAMI FL	4.4 CITY-ST-ZIP	Miami, Florida 33055
TITLE	TD <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MONTTANEZ, PETER	5.2 NAME	
STREET ADDRESS	7400 TWIN SABAL DRIVE	5.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI LAKES FL	5.4 CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> DELETE	6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DOMINGO, CARDOSA	6.2 NAME	CARDOSO, DOMINGO
STREET ADDRESS	6882 N.W. 173RD DRIVE, APT 807	6.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	6.4 CITY-ST-ZIP	

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 if changed, or on an attachment with an address.

SIGNATURE: Domingo Cardoso Date: 1/27/97 Daytime Phone #: (305) 556-5400

CR2E037 (9/96)