FILE NOW: FILING FEE IS \$61.25

STREET ADDRESS

SIGNATURE:

 I hereby certify that the information supplied indicated on this annual report or supplieried officer or director of the corporation or the Block 12 or Block 13 if changed, or on an

CITY-ST-ZIP

FILED NONPROFIT FLORIDA DEPARTMENT OF STATE Feb 04 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # (4)N49618 IGLESIA CRISTO LA UNICA ESPERANZA, INC. Principal Place of Business Mailing Address 5510 W. SAMPLE ROAD 1254 N.W. 66TH AVENUE 3. Date incorporated or Qualified MARGATE FL 33073 MARGATE FL 33063-3410 06/23/1992 4. FEI Number Applied For 65-0341674 Not Applicable 2a. Mailing Address 2. Principal Place of Business \$8.75 Additional 5. Certificate of Status Desired 5514 W SAMPLE ROAD 26 Fee Required Suite, Apt. #, etc. Suite, Apt. #, etc. 6. Election Campaign Financing \$5.00 May Be 22 27 Trust Fund Contribution Added to Fees City & State City & State 7. Is this nonprofit corporation a homeowners association? FL M ARGATE Yes 28 □ No 23 Country Country This corporation owes or has paid the current year Intangible BROWAGE ☐ Yes 29 30 Personal Property Tax due June 30. 24 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MASTRIANNNI, EDIE 82 Street Address (P.O. Box Number is Not Acceptable) 1531 SE HARMONY COURT 83 PORT ST. LUCIE FL 34952 84 City Zlp Code 85 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 (amiliar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. DELETE TITLE 1.1 TITLE Change Addition JONES, ROBERTO 1.2 NAME NAME **CR2E037** 1254 NW 66TH AVE. STREET ADDRESS 1.3 STREET ADDRESS MARGATE FL 33063 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change TIT) F 2.1 TITLE Addition NAME HERNANDEZ, RAYMOND 2.2 NAME 5851 N.W. 37TH AVENUE STREET ADDRESS 2.3 STREET ADDRESS **COCONUT CREEK FL 33073** CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE 3.1 TITLE Change Addition TITLE HERNANDEZ, MIRIAM NAME 3.2 NAME 5851 N.W. 37TH AVENUE 3.3 STREET ADDRESS STREET ADDRESS **COCONUT CREEK FL 33073** CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition DEL TORO, LYDIA 4. 2 NAME 5301 S.W. 6TH PL STREET ADDRESS 4.3 STREET ADDRESS POMPANO BEACH FL 33068 CITY-ST-7IE 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIF DELETE Change Addition TITLE 6.1 TITLE 62 NAME NAME

> 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

AIR BERTS! LIGHT

with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information tal 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 deliver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in activities with an address.