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NONPROFIT CORPORATION ANNUAL REPORT



DOCUMENT # N9200000463

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

1999

THE CHURCH OF ERC (INC.)

DIVISION OF CORP

FILED Mar 09, 1999 8:00 am § Secretary of State

03-09-1999 90117 028 ****61.25

		•	
ncinal Place of Business	Mailing Address		

13231 SW 67 MIAMI FL 331	=	13231 SW 67TH STREET MIAMI FL 33183					
Principal Place of Business 2a. Mailing Address		 		3. Date Incorporated or Qualifed 11/24/1992			
21		26			4. FEI Number	TARE	lied For
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			65-0374494	 	Applicable
22		27			00 007 1701	—\$8.75-A	
City & Sta	te	City_& State	-	-	5. Certifcate of Status Desired	Fee Rec	
28 Zip Country Zip		Zip	Country		6. Election Campaign Financing \$5.00		Mav Be
24			30		Trust Fund Contribution Added to Fees		
	9. Name and Address of Current				10. Name and Address of New Registered	Agent	
			81	Name			
	nte, Joseph		82	Street Add	dress (P.O. Box Number is Not Acceptable)		
-	V 67TH STREET		83				
MIAMI FL	. 33183					95 7:- 0	·ada
			84	City	· FI	_ 85 Zip C	ode
office or	registered agent, or both, in the State of am familiar with, and accept the obligat	of Florida. Such change was autions of, Section 617.0503, Flori	tnonzeg by da Statutes	the corporat	poration submits this statement for the purpose of the purpose of the portion's board of directors. I hereby accept the appoint when reinstating). DATE	midileit as reg	
12.	OFFICERS AN		13.	nt organization or a sequen	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	RS IN 12
TITLE	D	DELETE	1.1 TITLE			☐ Change	Addition
	MARCHANTE, JOSEPH		1.2 NAME				
NAME	ARREST AND ATTENDED		1	T ADDRESS			
STREET ADDRESS	MIAMI FL 33183						
CITY-ST-ZIP		☐ DELETE	1.4 CITY-S 2.1 TITLE	1-21		☐ Change	Addition
TITLE	D MADCHANTE LAZADA	- Officia	2.2 NAME	-			_
NAME	MARCHANTE, LAZARA			TADDDESS		•	
STREET ADDRESS	1			T ADDRESS			
CITY-ST-ZIP	MIAMI FL 33183	☐ DELETE	2.4 CITY-5	S1-ZIP		Change	Addition
TITLE	D MADCHANTE KATHEDINE		3.2 NAME				
NAME	MARCHANTE, KATHERINE			TADDOCCC			
STREET ADDRESS	1			T ADDRESS	•		
CITY-ST-ZIP	MIAMI FL 33183	☐ DELETE	3.4. CITY-5	S1-ZIP	, , , , , , , , , , , , , , , , , , , ,	☐ Change	☐ Addition
TITLE		المال	4.1 IIILE 4.2 NAME			- •	_
NAME OVERT ADDRESS				TADDRESS	•		
STREET ADDRESS	`		4.3 STREE	·			
CITY-ST-ZIP		☐ DELETE	5.1 TITLE	71-2fr		☐ Change	Addition
NAME		<u> </u>	5.2 NAME				•
			1	TADDRESS		÷	
STREET ADDRESS	9		5.4 CITY-S			***	
CITY-ST-ZIP		☐ DELETE	6.1 TITLE	· -		Change	Addition
1			6.2 NAME			-	
NAME CTREET ADDRESS				TADORESS		•	
STREET ADDRES	9		6.4 CITY-5				
CITY-ST-ZIP				- 1			

CITY-ST-ZIP

14. I 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, with all other like empowered.

SIGNATURE:

2/23/99 (305)386-1346

KZE037 (11/98