

**FILED**  
**Feb 13, 2006 8:00 am**  
**Secretary of State**

01-10-2006 90027 003 \*\*\*\*61.25

**2006 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

1/

**66001261**

<b>DOCUMENT # N93000002063</b>					
<b>1. Entity Name</b> HISPANIC CHRISTIAN CHURCH MOUNT ZION, INC.					
<b>Principal Place of Business</b> 306 N. ANOKA AVE. AVON PARK, FL 33825			<b>Mailing Address</b> P.O. BOX 547 AVON PARK, FL 33826		
<b>2. Principal Place of Business</b>			<b>3. Mailing Address</b>		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 59-3179686	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
<b>6. Name and Address of Current Registered Agent</b>  RAMOS, GREGORIO 306 N. ANOKA AVENUE AVON PARK, FL 33825				<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>Filing Fee is \$61.25</b> <b>Due by May 1, 2006</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ROMAN, CECILIA 2650 N ARCIOLA ROAD AVON PARK, FL 33825	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Roman, Cecilia 2650 N. Arciola Rd Avon Park, FL 33825	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR GARCIA VICENS, JOSE 4018 EL RADO AVN. SEBRING, FL 33870	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR Leslie Rodriguez 4717 Thruway Ave Sebring, FL 33870	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BERMUDEZ, ANGIE 1933 W BERMUDA DRIVE AVON PARK, FL 33825	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Pastor: Gregorio Ramos 1717 W. Fondulac Rd. Avon Park, FL 33825	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR CRESPO, NILDA 3020 SPIKES ROAD SEBRING, FL 33870	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR Beatrice Nieves-Santiago 2100 W Stryker Rd Avon Park, FL 33825	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BERMUDEZ, PABLO 1933 W. BERMUDEZ DR. AVON PARK, FL 33825	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	M Ramos, Helia 1717 W. Fondulac Rd Avon Park, FL 33825	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	M RAMOS, HELIA 2922 GROUPEL DRIVE SEBRING, FL 33870	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	M Ramos, Helia 1717 W. Fondulac Rd Avon Park, FL 33825	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Gregorio Ramos Jr</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					

Gregorio Ramos Jr  
 P-Pastor 1/5/06, (863) 453-4343  
 (Member of Board)

ATTACHMENT



66 001241

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 12, 2006

HISPANIC CHRISTIAN CHURCH MOUNT ZION, INC.  
P.O. BOX 547  
AVON PARK, FL 33826

Subject: HISPANIC CHRISTIAN CHURCH MOUNT ZION, INC.

Reference Number: N93000002063

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$61.25; however, the report has not been filed and a copy is being returned for the following correction(s):

The person that signed the annual report/uniform business report is not listed as a current officer/director of the corporation. The person signing must be listed as a current officer/director on the report or on an attachment.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/rm

ANNUAL REPORTS SECTION

2/7/06/spoke w/ Simon  
Per your request we  
have made the correction  
and added Gregorio  
Ramos Jr on the list  
of Directors he is a  
member of the Board  
of Directors.  
Mrs. Ramos

P.O. BOX 6327 - Tallahassee,