FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

POCUMENT # N93000002264 (0)

IGLESIA CATOLICA APOSTOLICA AMERICANA INC.

Principal Pla	ace of Business	Mailing Address							
701 E 4 AVENUE HIALEAH FL 33010		701 E 4 AVENUE HIALEAH FL 33010		3. Date Incorporated or Qualified 05/18/1993 4. FEI Number Applied For					
2. Principal	Place of Business	1.40		65-0412378 Not Applicab	le				
	riace of business	2a. Mailing Address		5. Certificate of Status Desired S8.75 Additional					
21 26 Suite, Apt. #, etc. Suite, Apt. #, etc.				Fee Required					
22		27 Suite, Apr. #, etc.		6. Election Campaign Financing \$5.00 May Be					
City & State City & State				Trust Fund Contribution Added to Fees					
23		28		7- Is this nonprofit corporation a homeowners association?					
Zip	Country	Zip	Country						
24	25	29	30	8. This corporation owes or has paid the current year Intendible Personal Property Tax due June 30. Yes No					
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Registered Agent					
			81 Name		_				
	FRAY RAFEAL		82 Street A	CAMPREO MELO JOSE address (P.O. Box Number is Not Acceptable)					
1	TH AVENUE		76	DIE 4TH AVENUE					
•	H FL 33010		83						
<i>7</i> -			84 City	HALEAH FL 33010 - 85 Zip Code					
11. Purcuant	to the mulicipan of Scations 617.05	047 4500 El	1 1 -						
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 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 artifamiliar with, and accept the obligations of, Section 617.0503, Florida Statutes.									
agent. La	arn familiar with, and accept the oblig	tions of, Section 617.0503, Flor	ida Statutes.	station of board or directors. Thereby accept the appointment asyregistered					
SIGNATURE		Į.		# / X 17/2					
12. 7		ent and little if applicable (NOTE: D DIRECTORS	Registered Agent signature re						
TITLE	PD	DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	_				
NAME	MELO, MONS JOSE C	 "	1.2 NAME	L Change L Addition	3 [
STREET ADDRESS									
CITY-ST-ZIP	BALBUENA COD 15960 MEXI		1.3 STREET ADDRESS 1.4 City-St-Zip		-				
TITLE	VP	DELETE	2.1 TITLE	☐ Change ☐ Addition	\exists				
NAME	BARAJAS, MONS. JOSE R		2.2 NAME	Complex 1 Addition	1				
STREET ADDRESS	ZOQUIPA Y CUCURPE COL [EL PARQUE	2.3 STREET ADDRESS						
CITY-ST-ZIP	BALBUENA COD 15960 MEXI	CO DF	2.4 CITY-ST-ZIP		1				
TITLE	T	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition	\forall				
NAME	MARTINEZ, FR.TARCISIO A		3.2 NAME						
STREET ADDRESS	ZOQUIPA Y CUCURPE COL E	el parque	3.3 STREET ADDRESS						
CITY-ST-ZIP	BALBUENA COD 15960 MEXIC		3.4. C/TY - ST - Z/P						
TITLE	D§	☐ DELETE	4.1 TITLE	Change Addition	7				
NAME	ORTA, FRAY R		4. 2 NAME		1				
STREET ADDRESS	701 E 4 AVENUE		4.3 STREET ADDRESS						
CITY-ST-ZIP	HIALEAH FL 33010 AS	DELETE	4.4 CITY-ST-ZIP						
NAME	OCTAVIO, MOTTE F	C) DECER	5.1 TITLE	☐ Change ☐ Addition					
STREET ADORESS	701 E 4 AVENUE		5.2 NAME						
CITY-ST-ZIP	HIALEAH FL 33010		5.3 STREET ADDRESS						
TITLE	THALLAST I L JOUIN	DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		1				
NAME		FI VELLE	6.1 TITLE 6.2 NAME	7000024123 P Change Addition -01/27/98-01033-007 PE					
STREET ADDRESS				-01/27/9801033007 PE					
			63 STREET ADDRESS	###D1 00	1				

CITY-ST-ZIP

****61.25

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 armost report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an Block 12 or Block 13 if changed or on an attachment with an address.

FILED

Jan 26 1998 8:00am

Secretary of State

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COF ANNU	ONPROFIT RPORATION JAL REPORT 1998		Sandra B Secretai	TMENT OF STATE Mortham y of State CORPORATIONS					
	MENT # NS	30000022	• • •						
Principal Place		Mailing /							
701 E 4 AVENU HIALEAH FL 330		701 E 4 A HIALEAH I		3. Date Incorporated or Qualified 05/18/1993					
					4. FEI Number 65-0412378	Applied For Not Applicable			
	ace of Business	├ ¬	ng Address	 -	5. Certificate of Status Desired	\$8.75 Additional			
Sulte, Apt.	#, etc.	 1	, Apt. #, etc.		6. Election Campaign Financing	Fee Required \$5.00 May Be			
City & State	6	27 City 8	& State		7- Is this nonprofit corporation a homeowr	Added to Fees ners association?			
23 Zip	Country	28 Zip		Country	Yes 8. This corporation owes or has paid the	No No			
24	25	29		30	Personal Property Tax due June 30.	Yes No			
	v. Name and Address	of Current Registered	Agent	81 Name	10. Name and Address of New Registers	TOSE			
	RAY RAFEAL			82 Street Addre	ess (P.O. Box Number is Not Acceptable)	7086			
	TH AVENUE FL 33010			701	E 4TH AVENUE				
# ·	110 00010			84 City H	1ALEAH, F1.33010 F	a 85 Zjp Code			
11. Pursuant I	to the provisions of Sectio	ns 617.0502 and 617.150	08, Florida Statute			c of changing its registered			
effice or re agent. I a	egistered agent, or both, or familiar with, and accer	n the State of Florida. Sur He obligations of, Secti	ch change was a ion 617.050 <mark>3,</mark> Flo	uthorized by the corporation of	oration submits this statement for the purpose on's board of directors. I hereby accept the a	ppointment as registered			
SIGNATURE	Signatura	Constered agent and little if applica	able (NOTE	Registered Agent signature require	d when reinstating) DATE	1/8/70			
12. 7		ICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS A				
TITLE NAME	PD MELO, MONS JOSE	С	[_] DELETE	1.1 TITLE 1.2 NAME		Change Addition			
STREET ADDRESS	ZOQUIPA Y CUCUR	PE COL DEL PARQUE		1.3 STREET ADDRESS					
CITY-ST-ZIP	BALBUENA COD 15	960 MEXICO DF	DELETE	1.4 C/TY-ST-Z/P		Change Addition			
TITLE NAME	VP Barajas, Mons. J	OSE B	L' DECETE	2.1 TITLE 2.2 NAME		Cuange Crydunion			
STREET ADDRESS		PE COL DEL PARQUE		2.3 STREET ADDRESS					
CITY-ST-ZIP	BALBUENA COD 15	960 MEXICO DF		2.4 CITY-ST-ZIP					
TITLE	AAADTINGT FO TADO	1010 4	☐ DELETE	3.1 TITLE 3.2 NAME		Change Addition			
NAME STREET ADDRESS	MARTINEZ, FR.TARC	PE COL DEL PARQUE		3.3 STREET ADDRESS					
CITY-ST-ZIP	BALBUENA COD 15			3.4. CITY-ST-ZIP					
TITLE	D\$		DELETE	4.1 TITLE		☐ Change ☐ Addition			
NAME Street Address	orta, fray r 701 e 4 avenue			4.2 NAME 4.3 STREET ADDRESS					
CITY-ST-ZIP	HIALEAH FL 33010			4.4 CITY-ST-ZIP					
TITLE	AS		DELETE	5.1 TITLE		Change Addition			
NAME	OCTAVIO, MOTTE F			5.2 NAME					
STREET ADDRESS CITY-ST-ZIP	701 E 4 AVENUE HIALEAH FL 33010			5.3 STREET ADDRESS 5.4 CITY-ST-ZIP					
TITLE	THE PROPERTY OF THE PROPERTY O		DELETE	6.1 TrTLE	7000024120	Change			
NAME				6.2 NAME	7000024125 -01/27/98010330	007' 86			
STREET ADDRESS				63 STREET ADDRESS	***61.25	1.26			
14. I hereby c	ertify that the information	supplied with this filing do	oes not qualify fo	f the exemption stated in S	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 eath; 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 13 if changed or on an attachment with an address.									
SIGNATI	URE: N	_ 1	1 40		118198				