

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N93000005423 (9)

1. Corporation Name

IGLESIA BAUTISTA VICTORIA EN CRISTO INC.



Principal Place of Business

13937 SW 44TH LN
CR #B
MIAMI FL 33175

Mailing Address

13937 SW 44TH LN
CR #B
MIAMI FL 33175

2. Principal Place of Business

21 10481 SW 88th St #D-203

Suite, Apt. #, etc.

22 City & State

MIAMI FL

24 Zip

33173

Country

Dade

2a. Mailing Address

26 13937 SW 44th Ln, CR-

Suite, Apt. #, etc.

B

27 City & State

28 MIAMI FL

Zip

33175

Country

Dade

3. Date Incorporated or Qualified
11/22/1993

3a. Date of Last Report
05/11/1995

4. FEI Number
65-0464094

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

PALACIOS, VICTOR M
13937 SW 44TH LN
CR #B
MIAMI FL 33175

10. Name and Address of New Registered Agent

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME PALACIOS, VICTOR M.
STREET ADDRESS 13937 SW 44TH LANE, CIR. B
CITY-ST-ZIP MIAMI FL

TITLE ☒ DELETE

NAME POLO, ADELA
STREET ADDRESS 3840 SW 102ND AVE., #D-202
CITY-ST-ZIP MIAMI FL

TITLE ☐ DELETE

NAME PALACIOS, MARTHA G.
STREET ADDRESS 13937 SW 44TH LANE, CIR. B
CITY-ST-ZIP MIAMI FL

TITLE ☐ DELETE

NAME ALVAREZ Celestino
STREET ADDRESS 21421 NW 3 ST
CITY-ST-ZIP MIAMI FL 33029

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☒ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: Martha G. Palacios
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)