

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **N93000005509 (5)**

1. Corporation Name

INTERNATIONAL CHRISTIAN CENTER, INC.



Principal Place of Business

Mailing Address

922 NE 62ND ST
OAKLAND PARK FL 33334
US

PO BOX 451987
SUNRISE FL 33322

3. Date Incorporated or Qualified
11/30/1993

3a. Date of Last Report
02/01/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number
65-0455253

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

10. Name and Address of New Registered Agent

REYES, EMILIO A
8004 NW 28TH PLACE
SUNRISE FL 33322

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> DELETE
PD	REYES, EMILIO A	8004 NW 28TH PLACE	SUNRISE FL 33322	<input type="checkbox"/>
TD	CALZADILLA, CARMEN	4795 SUGAR PINE DR.	BOCA RATON FL 33487	<input type="checkbox"/>
SD	LEGUIZAMON, IVAIDA	7929 NW 3RD PLACE	MARGATE FL	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
President	Reyes, Emilio A.	8004 NW 28 PL	SUNRISE, FL 33322	<input checked="" type="checkbox"/> SAME
Treasurer	Pinero, Awilda	801 NE 32 CT.	Pompano Beach, FL 33064	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
Secretary	Carmen L. Olmedo	6496 NW 78 Drive	Parkland, FL 33067	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *Emilio A. Reyes* Emilio A. Reyes 1/23/96 954-351-0550
Date Day/Time Phone #

CR2E037 (12/95)