FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N9400000422

1. Corporation Name

MIAMI FL 33167

IGLESIA PENTECOSTAL MISION DE LOS 70'S, INC.

Principal Place of Business

IGLESIA PENTECOSTAL MISION DE LOS 70. INC
1434 NW 116 ST.

P.O. BOX 681398 F MIAMI FL 33167—1398

Mailing Address C/O GERALDO P.O. BOX 681398

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				/ 1				
2. Principal P	ncipal Place of Business 2a. Mailing Address GERALDO-CRUON				Out 3. Date incorporated or Qualifed			
21					01/10/1004			
Suite, Apt.	#. etc	Suite, Apt. #, etc.			4. FEI Number	 	plied For	
22	1400V	27 POIBOX 6	0-1-0	-1-0			t Applicable	
City & Stat				5. Certificate of Status Desired	\$8.75 A Fee Red			
23	Country Zip — — — Country — — — — — — — — — — — — — — — — — — —						<u>. </u>	
Zip /	Country	29 33/67-13/130	' 4 '	DAD	6. Election Campaign Financing	6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees		
24	[25]	10. Name and Address of New Registered		01003				
Name and Address of Current Registered Agent					P 10 000 P	rigoni		
				81 Name SAMe				
HERNANDEZ, GERARDO				82 Street Address (P.O. Box Number is Not Acceptable)				
1434 NW 116 STREET				83				
MIAMI FL 33167				'i				
			84	City		85 Zip C	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			nt signature req	uired when reinstating) ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTO	RS IN 12	
12.	OFFICERS AND	DIRECTORS DELETE			ADDITIONS/CHANGES TO OFFICEROAL	☐ Change	Addition	
TITLE	DP	TT DETELE	1.1 TITLE		the and the	CT Cutango		
NAME	HERNANDEZ, GERARDO		1.2 NAMÉ	- 1	n/9/ ///			
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CITY-ST-ZIP	MIAMI FL 33167		1.4 CITY-5	T-ZIP			T A delicion	
TITLE	DVP	☐ DELETE	2.1 TTLE		10.00	Change	☐ Addition	
NAME	HERNANDEZ, VIRGINIA		2.2 NAME					
-STREET ADDRESS	-1434 NW_116 ST	<u> </u>	2.3 STREE	TADDRESS				
CITY-ST-ZIP	IMPRINT L DOTO		2.4 CITY-	ST-ZIP				
TITLE	DST	☐ DELETE	3.1 TITLE			☐ Change	☐ Addition	
NAME	CONTRERAS, ESTEBAN		3.2 NAME				ļ	
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TITLE		☐ DELETE	5.1 TITLE	- T		☐ Change	☐ Addition	
NAME		•	5.2 NAME					
STREET ADDRESS			5.3 STREET ADDRES		<u> </u>		ļ	
CITY-ST-ZIP			5.4 CITY-5	T-ZIP				
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NAME			6.2 NAME		<u>-</u>	_	·	
STREET ADDRESS			6.3 STREE	TADDRESS			}	
CITY-ST-ZIP			6.4 CITY-S	T-ZIP				
City Cricil								

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: SIGNATURE AND TYPED OR PRINTED FLAME OF SIGNATURE AND TYPED OR PRINTED OF SIGNATURE AND TYPED OR PRINTED FLAME OF SIGNATURE AND TYPED OR PRINTED OF SIGNATURE OF SIGNATURE AND TYPED OR PRINTED OF SIGNATURE AND TYPED OR PRINTED OF SIGNATURE OF SIGNATURE AND TYPED OR PRINTED OR