

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



DEPARTMENT OF REVENUE
Treasury & Finance
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

55 FEB 23 PM 4:18

DOCUMENT # N94000000612 (1)

1. Corporation Name

TEMPLO DEL ALTISIMO EL ELOHIM, INC.

Principal Place of Business

3411 W GRIFFIN ROAD
FT LAUDERDALE FL 33312

Mailing Address

3411 W GRIFFIN ROAD
FT LAUDERDALE FL 33312

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/31/1994

3a. Date of Last Report

4. FEI Number

65-0469801

Applied For

Not Applicable

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)

☒

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,

Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

CORTES, EFRAIN
1000 E ATLANTIC BLVD
SUITE 204
POMPANO BEACH FL 33060

10. Name and Address of New Registered Agent

81 Name

Mary Jo Rivero

82 Street Address (P.O. Box Number is Not Acceptable)

8910 Miramar Parkway Suite # 308

83

Miramar, Fl. 33025

84 City

Miramar, FL

FL

85 Zip Code

33025

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Mary Jo Rivero

(Signature, typed or printed name of registered agent and title if appropriate)

(NOTE: Registered Agent signature required when reinstated)

DATE

2/13/95

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

PD
VAZQUEZ, RAFAEL
225 N 62ND AVE, 103
HOLLYWOOD FL 33024

VSD
VAZQUEZ, ESPERANZA
225 N 62ND AVE, 103
HOLLYWOOD FL 33024

TD
RIOS, FIDENCIO
4149 SW 48TH CT X
FT LAUDERDALE FL 33314 XXX

SD
ANGULO, DOLORES XXXX
1436 ANDREWS AVE XXX
FT LAUDERDALE FL 33314 X

D
MARTINEZ, PEDRO XXXXXXXX
5736 SIMMS STREET XX
HOLLYWOOD FL 33024 XXXXX

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

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SIGNATURE:

Rafael Vazquez

(Typed name and title of officer or director)

RAFAEL VAZQUEZ 2/23/95 764-9127

305

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