FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION
ANNUAL REPORT
1995

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

APPROVED AND FILED

95 MAY -1 AM 9:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N94000001675 (7)**

1. Corporate Name

IGLESIA AMOR DIVINO, ASAMBLEAS DE DIOS, INC.

Principal Place of Business
7910 N.W. 103RD STREET
HIALEAH GARDENS FL

Mailing Address
7910 N.W. 103RD STREET
HIALEAH GARDENS FL

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/05/1994

3a. Date of Last Report:

4. FEI Number: Applied For ☐ ☒ Not Applicable

2. Principal Place of Business
21:
22: Suite, Apt #, etc
23: City & State
24: Zip
25: Country

2a. Mailing Address
26: 1810 S W 99 AVE
27: Suite, Apt #, etc
28: City & State: MIRAMAR FL ~~33025~~
29: Zip: 33025
30: Country: USA

5. Certificate of Status Desired ☐ — **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — **$5.00** May Be Added to Fees

7. Nonprofit with IRS 501(c)3 Tax Exempt Status ☒ — **$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

MIRANDA, LUIS REV.
1810 S.W. 99TH AVENUE
MIRAMAR FL 33025

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 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: (Typed or Printed Name of Registered Agent and Title if applicable) (If I, Registered Agent signature required after formation) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	☐ Change ☐ Addition
NAME	MIRANDA, LUIS	1.2 NAME	
STREET ADDRESS	1810 S.W. 99TH AVENUE	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIRAMAR FL 33025	1.4 CITY-ST-ZIP	
TITLE	VD	2.1 TITLE	☐ Change ☐ Addition
NAME	MENA, ROGER	2.2 NAME	
STREET ADDRESS	3200 N.W. 79TH STREET	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33147	2.4 CITY-ST-ZIP	
TITLE	SD	3.1 TITLE	☒ Change ☐ Addition
NAME	RIVAS, MARITZA	3.2 NAME	SECRETARY MARIA BUENO
STREET ADDRESS	6055 W. 19TH AVENUE, SUITE 217	3.3 STREET ADDRESS	2769 W. 71 TERRACE
CITY-ST-ZIP	HIALEAH FL	3.4 CITY-ST-ZIP	HIALEAH, FL. 33016
TITLE	TD	4.1 TITLE	☒ Change ☐ Addition
NAME	MASIS, MARIA	4.2 NAME	TREASURER RAUL PACHECO
STREET ADDRESS	% 7910 N.W. 103RD STREET	4.3 STREET ADDRESS	273 C. N.W. 47 TERRACE
CITY-ST-ZIP	HIALEAH GARDENS FL	4.4 CITY-ST-ZIP	MIAMI FL. 33125
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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)(i), Florida Statutes. 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Rev. Luis Miranda — PRESIDENT 4/29/95 (305) 436-9701

SIGNATURE AND TYPED OR PRINTED NAME OF BONING OFFICER OR DIRECTOR — Date — Daytime Phone #

REV LUIS MIRANDA

0037691