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NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N94000002034 (6)

1. Corporation Name

IGLESIA BAUTISTA EL MESIAS, INC.



Principal Place of Business

517 S.W. 96TH COURT
MIAMI FL 33174

Mailing Address

517 S.W. 96TH COURT
MIAMI FL 33174

3. Date Incorporated or Qualified
04/21/1994

3a. Date of Last Report
04/05/1995

2. Principal Place of Business

21 7475 S.W. 8th St.

2a. Mailing Address

26 Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

23 MIAMI, FL.

24 Zip

33144

Country

25 Dade

26 Suite, Apt. #, etc.

27 City & State

28 MIAMI, FL.

29 Zip

33144

Country

25 Dade

30 Suite, Apt. #, etc.

31 City & State

32 MIAMI, FL.

33 Zip

33144

Country

25 Dade

34 Suite, Apt. #, etc.

35 City & State

36 MIAMI, FL.

37 Zip

33144

Country

25 Dade

38 Suite, Apt. #, etc.

39 City & State

40 MIAMI, FL.

41 Zip

33144

Country

25 Dade

42 Suite, Apt. #, etc.

43 City & State

44 MIAMI, FL.

45 Zip

33144

Country

25 Dade

46 Suite, Apt. #, etc.

47 City & State

48 MIAMI, FL.

49 Zip

33144

Country

25 Dade

50 Suite, Apt. #, etc.

51 City & State

52 MIAMI, FL.

53 Zip

33144

Country

25 Dade

54 Suite, Apt. #, etc.

55 City & State

56 MIAMI, FL.

57 Zip

33144

Country

25 Dade

58 Suite, Apt. #, etc.

59 City & State

60 MIAMI, FL.

9. Name and Address of Current Registered Agent

SILVA, JOSE SR
517 S.W. 96TH COURT
MIAMI FL 33174

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 state if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME SILVA, JOSE JR
STREET ADDRESS 2055 S.W. 122ND AVE. #122
CITY-ST-ZIP MIAMI FL 33175

TITLE D ☐ DELETE

NAME SILVA, JOSE SR
STREET ADDRESS 517 S.W. 96TH COURT
CITY-ST-ZIP MIAMI FL 33174

TITLE D ☐ DELETE

NAME PALACIO, ALBERTO
STREET ADDRESS 3647 S.W. 90TH AVE.
CITY-ST-ZIP MIAMI FL 33165

TITLE D ☐ DELETE

NAME CALVET, ANGELES
STREET ADDRESS 2037 S.W. 3RD ST. #6
CITY-ST-ZIP MIAMI FL 33135

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

2075 S.W. 122 AVE # 212
MIAMI, FL. 33175

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02/12/96 (305) 223-2277

Date

Daytime Phone #

CR2E037 (12/95)