FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1. Corporation Name

IGLESIA BAUTISTA EL MESIAS, INC.

DOCUMENT # N9400002034

Principal Place of Business 5545 S.W. ETH STREET #204

517 S.W. 96TH COURT MIAMI FL 33174

Mailing Address

MIAMI-FL 33194

US

04-27-1999 90175 045 ****61.25

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2. Principa Place of Business 21 5/7 S.W. 96th Court	2a. Mailing Address		3. Date Incorporated or Qualifed 04/21/1994	· 				
Suite, Apt. #, etc.	Suite, Apt. #, etc.		4. FEI Number 65-0481631	Aprlied For Not Applicable				
City & State 23 HIAMI, FL	City & State	<u> </u>	5. Certifcate of Status Desired	\$8.75 Additional Fee Recuired				
Zip Country 24 33174 25 H:AHI-DAZ	L	untry	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees				
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent					
		81 Name						
SILVA, JOSE SR 517 S.W. 96TH COURT		82 Street Acdress (P.O. Box Number is Not Acceptable)						
MIAMI FL 33174		83						
# 174		84 City	F	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 cr re agent. ∣ a	egistered agent, or both, in the State of m familiar with, and accept the obligation	f Florida. Such change was autions of, Section 617.0503, Florid	norized by the corporate has statutes.	oration's board of c	irectors.	т петеву ассерт пе	appointment as reg	316760	
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTIE: R	agistered Agent signature r	equired when reinstating)		0	ATE		
12.	OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOF'S IN 12					
TITLE	₽	⊠ DELETE	1.1 TITLE	<u>, 75</u>			Change	☐ Addition	
NAME	SILVA, JOSE JR		1.2 NAME	G 15ELA	\mathcal{H}_{\cdot}	PALACIO			
STREET ADDRESS	2075 S.W. 122 AVE, STE 302		1.3 STREET ADDRESS	2075 5.	W.	122 ave 33175	· #513		
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP	Miami	_FL	<u> 33/75 </u>			
TITLE	D	☐ DELETE	2.1 TITLE				☐ Change	☐ Addition	
NAME	SILVA, JOSE SR		2.2 NAME	-					
STREET ADDRE'SS	517 S.W. 96TH COURT		2.3 STREET ADDRESS						
CITY-ST-ZIP	MIAMI FL 33174		2. 4 CITY-ST-ZIP						
TITLE	D	☐ DELETE	3.1 TITLE				Change	Addition	
NAME	PALACIO, ALBERTO		3.2 NAME						
STREET ADDRESS	AAT A AA AALIDT		3.3 STREET ADDRESS						
CITY-ST-ZIP	MIAMI FL		3.4. CITY-ST-ZIP	L					
TITLE	D	☐ DELETE	4.1 TITLE				Change	Addition	
NAME	NUNEZ, NILDA M.		4. 2 NAME	}				ļ	
STREET ADDRESS	11022 W FLAGLER ST		4.3 STREET ADDRESS	}					
CITY-ST-ZIP	MIAMI FL 33174		4.4 CITY-ST-ZIP						
TITLE		☐ DELETE	5.1 TITLE				Change	☐ Addition	
NAME			5.2 NAME						
STREET ADDRESS			5.3 \$TREET ADDRESS					,	
CITY-ST-ZIP			5.4 CITY-ST-ZIP						
TITLE		☐ DELETE	6.1 TITLE				Change	☐ Addition	
NAME			6.2 NAME						
STREET ADDRESS			6.3 STREET ADORESS						
CITY-ST-ZIP			6.4 CITY-ST-ZIP	i					

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 arm 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 a lother like empowered.

SIGNATURE: