

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 31, 2006 8:00 am**  
**Secretary of State**

03-31-2006 90015 013 \*\*\*\*61.25

**DOCUMENT # N94000002233**

1. Entity Name  
**PRIMERA IGLESIA BAUTISTA DE WYNWOOD, INC.**



Principal Place of Business  
**131 N.W. 29TH STREET  
MIAMI, FL 33127**

Mailing Address  
**188 N.W. 104TH STREET  
MIAMI, FL 33150**

**50007538**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03172006 Chg-NP CR2E037 (11/05)

City & State

City & State

4. FEI Number  
**59-2543276**

Applied For  
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**QUINONEZ, FRANCISCO G REV.  
131 N.W. 29TH STREET  
MIAMI, FL 33127**

Name

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

City

**FL**

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25  
Due by May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**Make check payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD  
NAME QUINONEZ T, FRANCISCO G ☐ Delete  
STREET ADDRESS 188 N.W. 104TH ST.  
CITY-ST-ZIP MIAMI SHORES, FL 33150

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE VD  
NAME HERMENEGILDO, SALAZAR ☐ Delete  
STREET ADDRESS 17200 N.W. MIAMI COURT  
CITY-ST-ZIP MIAMI, FL 33139

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE SD  
NAME ESTEPE, TANIA ☐ Delete  
STREET ADDRESS 188 NW 104 ST.  
CITY-ST-ZIP MIAMI, FL 33150

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE TD  
NAME PEREZ, JULIAN ☐ Delete  
STREET ADDRESS 137 NW 29 ST  
CITY-ST-ZIP MIAMI, FL 33127

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE TD  
NAME VANEGAS, BETANIA ☐ Delete  
STREET ADDRESS 660 NW 11TH ST., #116  
CITY-ST-ZIP MIAMI, FL 33169

TITLE ☒ Change ☐ Addition  
NAME **Vanegas, Bethania**  
STREET ADDRESS **760 NW 141 St, Miami FL 33168**  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

*3/17/06*

*305-5733113*