

FILE NOW: FILING FEE IS \$61.25

FILED
May 19 1998 8:00am
Secretary of State

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| NONPROFIT CORPORATION ANNUAL REPORT 1998 |  | FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS |
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DOCUMENT # **N94000002852 (1)**

1. Corporation Name

IGLESIA PENTECOSTAL EL NUEVO PACTO, INC.



| | |
|---|---|
| Principal Place of Business | Mailing Address |
| 2424 SW 101 COURT MIAMI FL 33165 | 2424 SW 101 COURT MIAMI FL 33165 |

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|--|
| 3. Date Incorporated or Qualified 06/09/1994 |
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| | |
|------------------------------------|--|
| 4. FEI Number 65-0498160 | Applied For <input type="checkbox"/> Not Applicable |
|------------------------------------|--|

| | |
|--------------------------------|------------------------|
| 2. Principal Place of Business | 2a. Mailing Address |
| 21 Suite, Apt. #, etc. | 26 Suite, Apt. #, etc. |
| 22 City & State | 27 City & State |
| 23 Zip Country | 28 Zip Country |
| 24 | 29 |

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| 5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required |
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| 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees |
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| 7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
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| 8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No |
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| 9. Name and Address of Current Registered Agent |
| MONTANEZ, RAFAEL A 2424 SW 101 COURT MIAMI FL 33165 |

| |
|---|
| 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 _____ (NOTE: Registered Agent signature required when reappointing) DATE _____

| 12. OFFICERS AND DIRECTORS | |
|----------------------------|------------------------------------|
| TITLE | NAME |
| PD | MONTANEZ, RAFAEL A |
| STREET ADDRESS | 2424 SW 101 COURT |
| CITY-ST-ZIP | MIAMI FL 33165 |
| TITLE | NAME |
| S/D | EXPOSITO, NORA |
| STREET ADDRESS | 9821 SW 145 AVE. |
| CITY-ST-ZIP | MIAMI FL 33186 |
| TITLE | NAME |
| TD | BATISTA, RAFAEL |
| STREET ADDRESS | 9565 SW 24 STREET APT H-207 |
| CITY-ST-ZIP | MIAMI FL 33165 |
| TITLE | NAME |
| | |
| TITLE | NAME |
| | |
| TITLE | NAME |
| | |

| 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 |

14. 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 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: *Rafael A. Montanez* **RAFAEL A. MONTANEZ** 5/19/98 (200) 372-5023

CR2E037 (10/97)