## **FILE NOW: FILING FEE IS \$61.25**

**NONPROFIT** CORPORATION ANNUAL REPORT

1997

**SIGNATUR** 



FLORIDA DEPARTMENT OF STATE

**FILED** 

Mar 03 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 1. Corporation Name

## N9400005390 (9)

IGLESIA DE LA ROCA FIRME, CONVENCION BAUTISTA DE L SUR, INC.

Principal Place of Business Mailing Address				A SECTION OF THE PROPERTY OF T			
2150 SW 75 AV		12325 SW 20 TERR					44
MIAMI FL 33155 US	•	MIAMI FL 33175-7710					
03					<ol> <li>Date Incorporated or Qualified 10/31/1994</li> </ol>	3a. Date of Last Re 02/05/199	
2. Principal Pu	ace of Business	2a. Mailing Address		***************************************	4. FEI Number	T Ap	plied For
21 26		26			65-0537167	No	t Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	□ \$8.75 A	dditional	
22		27			b. Certificate of Status Desired	Fee Re	quired
City & State	9	City & State			6. Election Campaign Financing	\$5.00	May Be
23		28	.,		Trust Fund Contribution	Added to	Fees
Zip	Country	Zιρ	Count	ry	8. This corporation has liability for i		199.032,
24	25	29 29 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	30			Yes No	
	9. Name and Address of Curren	it Hegistered Agent	8	1 Name	10. Name and Address of New Re	gistered Agent	
			°	Name			
PALACI, DAVID				82 Street Address (P.O. Box Number is Not Acceptable)			
12325 SW 20 TERR				3			
miami fl	L 33175		l°	3			i
			8	4 City		- 85 Zip C	Code
44 5		0 047 4500 5112- 04-1				FL   "	
office or re	egistered agent, or both, in the State	of Florida. Such change was	authorized I	by the corpora	rporation submits this statement for the pation's board of directors. I hereby accep	ourpose or changing its of the appointment as	s registerea registered
agent. I ar	m familiar with, and accept the oblig	ations of, Section 617,0503, Fi	lorida Statut	es.		:	
SIGNATURE _		400	** <b>5</b>		and the same of th	DATE	
12.	Signature, typed or printed name of registered age OFFICERS AN		13.	geni signature requ	ulred when reinstating)  ADDITIONS/CHANGES TO OFFICE		S IN 12
TITLE	D	DELETE	1.1 TITLE	: '	ADDITIONS/GHANGES TO GITTE	Change	Addition
NAME	URIARTE, JUAN A		1.2 NAM	1		viidige	
STREET ADDRESS	3090 NW 2 ST			ET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33125		1.4 CITY	1			
TITLE	D DELETE		21 TITLE		······································	Change	Addition
NAME	SUAREZ, RODOLFO		2.2 NAM	E	•		
STREET ADDRESS	355 NW 72 AVE APT 210			ET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33126			- ST-ZIP			
TITLE	D DELETE		3.1 TITLE			☐ Change	Addition
NAME	FERNANDEZ, MANUEL		3.2 NAM	E			
STREET ADDRESS	10257 NW 9 ST CIR APT 113	}	3.3 STRE	ET ADORESS			
CITY - ST - ZIP	MIAMI FL 33172		3.4. CITY	-ST-ZIP			
TITLE	D	☐ DELETE	4.1 TiTLI			Change	Addition
NAME	CALLE, IGNACIO		4. 2 NAN	AE .	•		
STREET ADDRESS	1045-47 NW 9 ST CIR APT 1	13	4.3 STRE	ET ADDRESS			
CfTY - ST - ZIP	MIAMI FL 33172		4.4 CITY	- \$T - ZIP			
TITLE	D	DELETE	5.1 TITLE	E		☐ Change	Addition
NAME	LOZANO, NOEL		5.2 NAM	E			
STREET ADDRESS	4301 W FLAGLER ST APT 90		5.3 STAE	ET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33134			-ST-ZIP			
TITLE		☐ DELETE	6.1 TiTL	E		Change	Addition
NAME			6.2 NAM	E			
STREET ADDRESS			6.3 STRE	ET ADDRESS			
C(TY-ST-ZIP				-ST-ZIP		- 17 - 20	M
14. I do herek informatio	by certify that the information supplie on indicated on this annual∉eport or s	o with this filing does not qual supplemental annual report is	iity for the el true and ac	xemption state curate and the	ed in Section 119.07(3)(i), Florida Statute at my signature shall have the same lega	s. I further certify that i al effect as if made und	tne der oath; that
I am an of	fficer or director of the of poration of	the receiver or trustee empor	wered to ex		at my signature shall have the same lega ort as required by Chapter 617, Florida S	Statutes; and that my n	ame
appears n	n Block 12 or Block 12 if changed o	i on an algebritient with an ac	idress. 🖊	7		•	