

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
May 10, 1999 8:00 am  
Secretary of State

05-10-1999 90263 042 \*\*\*\*61.25

DOCUMENT # N94000005390

1. Corporation Name

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

Principal Place of Business

3350 SW 144 AVE  
MIAMI FL 33175  
US

Mailing Address

12325 SW 20 TERR  
MIAMI FL 33175



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip

30 Country

3. Date Incorporated or Qualified

10/31/1994

4. FEI Number

65-0537167

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

9. Name and Address of Current Registered Agent

PALACI, DAVID  
12325 SW 20 TERR  
MIAMI FL 33175

10. Name and Address of New Registered Agent

81 Name

DAVID PALACI

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

12325 SW 20 Tr

83

84 City

MIAMI

FL

85 Zip Code

33175

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DAVID PALACI

Apr 30 - 99

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☒ DELETE  
NAME URIARTE, JUAN A  
STREET ADDRESS 3090 NW 2 ST  
CITY-ST-ZIP MIAMI FL 33125

TITLE D ☐ DELETE  
NAME CARBASALES, R  
STREET ADDRESS 5670 W 21 AVE  
CITY-ST-ZIP HIALEAH FL 33016

TITLE D ☐ DELETE  
NAME FERNANDEZ, MANUEL  
STREET ADDRESS 10257 NW 9 ST CIR APT 113  
CITY-ST-ZIP MIAMI FL 33172

TITLE D ☐ DELETE  
NAME CALLE, IGNACIO  
STREET ADDRESS 1045-47 NW 9 ST CIR APT 113  
CITY-ST-ZIP MIAMI FL 33172

TITLE D ☒ DELETE  
NAME LOZANO, NOEL  
STREET ADDRESS 13270 SW 58 TR 2  
CITY-ST-ZIP MIAMI FL 33183

TITLE D ☐ DELETE  
NAME MANCINA, D  
STREET ADDRESS 6218 SW 131 PL 103  
CITY-ST-ZIP MIAMI FL 33183

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PRESIDENT ☒ Change ☐ Addition  
1.2 NAME Calle, Ignacio  
1.3 STREET ADDRESS 1045-47 NW 9 st. Cir Apt 113  
1.4 CITY-ST-ZIP MIAMI FL 33172

2.1 TITLE D ☐ Change ☐ Addition  
2.2 NAME CARBASALES, RAYMOND  
2.3 STREET ADDRESS SAME  
2.4 CITY-ST-ZIP

3.1 TITLE D ☐ Change ☐ Addition  
3.2 NAME FERNANDEZ, MANUEL  
3.3 STREET ADDRESS SAME  
3.4 CITY-ST-ZIP

4.1 TITLE D ☐ Change ☐ Addition  
4.2 NAME MANCINA, DAMIAN  
4.3 STREET ADDRESS SAME  
4.4 CITY-ST-ZIP

5.1 TITLE D ☐ Change ☒ Addition  
5.2 NAME ESCALONA, LUIS FELIX  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

04-30-99

CR2E037 (11/98)