


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 09, 2004 08:00 AM
Secretary of State

DOCUMENT # N95000000846
 1. Entity Name
 IGLESIA BAUTISTA HISPANA DE MIAMI LAKES, INC.



Principal Place of Business Mailing Address
 6250 MIAMI LAKES DR 6250 MIAMI LAKES DR
 MIAMI LAKES, FL 33014 US MIAMI LAKES, FL 33014 US

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01292004 No Chg-NP CR2E037 (10/03)

4. FEI Number Applied For
 65-0571395 Not Applicable

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

6. Name and Address of Current Registered Agent
 CRUZ, REYNER
 6625 W 4TH AVE
 #214
 HIALEAH, FL 33012

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25
Due by May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PT
NAME	MUNOZ, ERNESTO O
STREET ADDRESS	8856 NW 112 ST
CITY - ST - ZIP	HIALEAH GARDENS, FL 33016
TITLE	D
NAME	ULLOA, MARIO
STREET ADDRESS	5246 NW 192 LANE
CITY - ST - ZIP	MIAMI, FL 33055
TITLE	D
NAME	CRUZ, REYNER REV
STREET ADDRESS	6625 W 4TH AVE #214
CITY - ST - ZIP	HIALEAH, FL 33012
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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 02/10/04-80040-001 61.25

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12. 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 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:  ERNESTO O. MUÑOZ / PRESIDENT FEB. 6 2004 (305) 265-5422
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #