## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

## DOCUMENT # N9500001048 (6) 1. Corporation Name

IGLESIA BAUTISTA MANANTIAL DE VIDA INC.

incipal Place of Business Mailing Address				C SERVICES BOD OBSOLUELIES ESTIN DEL	c saestras and alean aleis abitt battl dattl datal tilli 1001 dattl 1011 1001		
13006 S.W. 51 STREET MIAMI FL 33175	13006 S.W. 51 STREET MIAMI FL 33175	ET		:			
				3. Date Incorporated or Qualified 03/06/1995	3a. Date of L	ast Report	
2. Principal Place of Business 11 First BaptistChurch of Perry	2a. Mailing Address			4. FEI Number EIN 65-0547843	<u> </u>	Applied For	
Suite, Apt. #, etc. 2 8900 S. W. 168 ST.	Suite, Apt. #, etc.			Certificate of Status Desired		Not Applicable .75 Additional	
City & State	City & State				F	ee Required	
Zip Country	28		<del></del>	Election Campaign Financing     Trust Fund Contribution	A	5.00 May Be dded to Fees	
4 33157 25 USA	Zip 29	30 Counti	ry		☐ Yes ☑ No		
9. Name and Address of Curre	it Registered Agent	8	A Name	10. Name and Address of New I	Registered Agent		
ARMENTEROS, CARLOS		١٠					
13006 S.W. 51 STREET		8:	2 Street	Address (P.O. Box Number is Not Acceptal	ble)		
MIAMI FL 33175		8:				<del>u</del>	
mirani i E 00170		5	3				
		84	34 City		85	Zip Code	
11 Pursuant to the provisions of Sections 617.0501	O and C12 1500 Florida Otal						
<ol> <li>Pursuant to the provisions of Sections 617.0502 or registered agent, or both, in the State of Flori familiar with, and accept the obligations of, Sect</li> </ol>	da. Such change was authoriz tion 617.0503, Florida Statute	zed by the cors.	poration's	orporation submits this statement for the purification of directors, I hereby accept the app	rpose of changing i iointment as registe	its registered offici red agent. I am	
SIGNATURE Signature, typed or printed name of registered agent	it and title if applicable, (N	MTF Rogistered Ar	nent einnature	required when reinstating)			
12. OFFICERS AN	ID DIRECTORS	13.	JII BY KINE	ADDITIONS/CHANGES TO OFF	DATE FICERS AND DIREC	TODE IN 12	
OTLE DP	DELETE	1.1 TITLE		7,000,000,000,000,000,000,000,000,000,0	Chang		
ARMENTEROS, CARLOS	<del></del>	1.2 NAME				ne Tayonnou	
STREET ADDRESS 13006 S.W. 51 STREET			ET ADDRESS				
CITY-ST-ZIP MIAMI FL 33175	_	1					
TITLE DS	DELETE	1.4 CITY- 2.1 TITLE		ADRIANA CARDONA	NO.	Fileday	
IAME BREJCHA, CLARA		2.1 THLE	, ,	THE THE PART OF TH	<b>∑</b> Chang	ge 🔲 Addition	
STREET ADDRESS 42588 S.W. 68TH COURT			= tenoree	84205W.133AVE.BLDG 2 MIAMI, FL 33183	4 <del>11</del> 311		
CITY-ST-ZIP MIAMI FL			ET ADDRESS	MIAMI, FL 33183			
ITLE DT	DELETE	2. 4 CITY -	-51-2ir	· · · · · · · · · · · · · · · · · · ·			
NAME SEREY, MARIA	□ DETEST	3.1 TITLE			Chang	ge Addition	
STREET ADDRESS 4910 S.W. 138TH AVE.		3.2 NAME	-				
LHALM PL AAAME		3.3 STREE	ET ADDRESS				
CITY-ST-ZIP MIAMI PL 331/5	- Dourte	3 4. CITY -	<del></del>			_:	
· · · · · · · · · · · · · · · · · · ·	DELETE	41 TITLE	J		Chang	ge 🔲 Addition	
NAME RODRIGUEZ, JESUS G		4. 2 NAME	: 1				
STREET ADDRESS 11540 S.W. 186TH STREET		4.3 STREE	ET ADDRESS				
DITY-ST-ZIP MIAMI FL 33157		4.4 CITY - 5	ST-ZIP				
TILE D	DELETE	5.1 TITLE	1	D	<b>C</b> trang	je 🔲 Addition	
RODRIGUEZ, SAMUEL A		5.2 NAME		LAZARO HERRERA			
STREET ADDRESS 20527 S.W. 92 COURT		5 3 STAEE	ET ADDRESS	12741 SW 256 ST.			
HTY-S1-ZIP MIAMI FL 33189		5.4 CITY - 5	ST-ZIP	MIAMI, F/ 33032	,		
TITLE	DELETE	6.1 TITLE			☐ Chang	e 🔲 Addition	
IAME		6.2 NAME	. 1	1		_	
STREET ADDRESS		6.3 STREE	T ADDRESS				
PITY-ST-ZIP		64 CITY-S	ST-ZIP				
<ol> <li>I do hereby certify that the information supplied w certify that the information indicated on this appure</li> </ol>	vith this filing is voluntarily furni	iobod ood doe		lify for the exemption stated in Section 119.	07/3)(k). Florida Sta	tutes. I further	
oath; that I am an officer or director of the coroor	ration or the receiver or truetoe	e empoyeered	Je and acc	curate and that my signature shall have the	same legal effect as	if made under	
appears in Block 12 or Block 13 if changed, or o	an attachment with an address	ess.	to execute	as required by Chapter 617, Fig	inda Statutes; and t	that my name	
Significant Date: 1	/ - Notae			ulita 1	_ 1	_	
SIGNATURE: Maria Se	PRINTED AME OF SIGNING OFFICER	1A 5	ere	cy 4/8/96 (	305)592-7 Daytime Phor	1288	
POIGNATURE AND TIPED ON	PRINTED NAME OF SIGNING OFFICER	A OR DIRECTOR		Date	Daytime Phor	ne #	