

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 # N95000001048 (6)
1. Corporation Name
IGLESIA BAUTISTA MANANTIAL DE VIDA INC.



Principal Place of Business: **13006 S.W. 51 STREET MIAMI FL 33175**
Mailing Address: **13006 S.W. 51 STREET MIAMI FL 33175**

3. Date Incorporated or Qualified: **03/06/1995**
3a. Date of Last Report

2. Principal Place of Business		2a. Mailing Address		4. FEI Number		Applied For	
21 FIRST BAPTIST CHURCH OF PEKIN		26		4. FEI Number EIN 65-0547843		<input checked="" type="checkbox"/> Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required	
22 8900 S.W. 168 ST.		27		6. Election Campaign Financing Trust Fund Contribution		<input type="checkbox"/> \$5.00 May Be Added to Fees	
City & State		City & State		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
23 MIAMI, FL		28		24 33157		25 USA	
Zip		Country		29		30	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
ARMENTEROS, CARLOS 13006 S.W. 51 STREET MIAMI FL 33175				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 reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	
NAME	ARMENTEROS, CARLOS	1.2 NAME	
STREET ADDRESS	13006 S.W. 51 STREET	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33175	1.4 CITY-ST-ZIP	
TITLE	DS	2.1 TITLE	DS
NAME	BREJCHA, CLARA	2.2 NAME	ADRIANA CARDONA
STREET ADDRESS	42588 S.W. 68TH COURT	2.3 STREET ADDRESS	8420 S.W. 133 AVE, BLDG 2 #311
CITY-ST-ZIP	MIAMI FL	2.4 CITY-ST-ZIP	MIAMI, FL 33183
TITLE	DT	3.1 TITLE	
NAME	SEREY, MARIA	3.2 NAME	
STREET ADDRESS	4910 S.W. 138TH AVE.	3.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33175	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	
NAME	RODRIGUEZ, JESUS G	4.2 NAME	
STREET ADDRESS	11540 S.W. 186TH STREET	4.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33157	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	D
NAME	RODRIGUEZ, SAMUEL A	5.2 NAME	LAZARO HERRERA
STREET ADDRESS	20527 S.W. 92 COURT	5.3 STREET ADDRESS	12741 SW 256 ST.
CITY-ST-ZIP	MIAMI FL 33189	5.4 CITY-ST-ZIP	MIAMI, FL 33032
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: *Maria Serrey* **MARIA SERREY** 4/8/96 (305) 592-7288
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (12/95)