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

NONPROFIT **CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

POCUMENT # N95000001759 (8)

IGLESIA CRISTIANA "ALARANZA V VIDA" INC

**FILED** May 26 1998 8:00am Secretary of State

IGLESI	A UNISTIANA ALABANZA	F VIDA , HYO.								
Principal Plac	e of Business	Mailing Address				1	t sookikaa ono antoa okiik soiki soili osiil soisi ot	ADI PADA PODI	JI <b>V</b> iiib 1811 1881	
1835 W. FLAGL MIAMI FL 33125		1731 SW 84 CT MIAMI FL 33155				ate Incorporated or Qualified  04/13/1995 El Number	<b>—</b>	Applied For		
2. Principal Place of Business 21. 8300 SW 85T Svite 103 26. Mailing Address 27. Mailing Address 28. Mailing Address 29. Mailing Address 20. Mailing Address 20. Mailing Address 20. Mailing Address 20. Mailing Address						5. Ce	ertificate of Status Desired	\$8.75	Not Applicable  5 Additional Required	
Suite, Apt. #, etc.  Suite, Apt. #, etc.  Suite							6. Election Campaign Financing Trust Fund Contribution Added to Fees			
City & Stat	141 F/	City & State	28			7. Is this nonprofit corporation a homeowners association?  Yes No				
Zip 33 /	9. Name and Address of Curren	Zip 29	30	intry		Pe	nis corporation owes or has paid the curersonal Property Tax due June 30.  Ame and Address of New Registered American States (1988)	Yes	Intangible  No	
	* Italie and Address of Curren	it Hoßisteren Wöhlt		81	Name	10. 14	ame and Address of New Registered (	4gent		
RODRIGUEZ, GEMIMAH 1350 N.W. 5TH STREET, #1 MIAMI FL 33125				82 83	Street Addre	ss (P.O.	Box Number is Not Acceptable)			
i Minani Ci	L 33 120			$\Box$	City		FL	85 Zi	ip Code	
office or r agent. I a SIGNATURE	to the provisions of Sections 617.050 egistered agent, or both, in the State or familiar with, and accept the oblig Signature, typed or printed harve of registered age	e of Florida. Such change was a lations of, Section 617.0503, Florida and Control of the Control	authorized orida Stat	d by t utes.	named corporation the corporation t signature required	on's boa	ubmits this statement for the purpose of rd of directors. I hereby accept the app	changing ointment	its registered as registered	
12.		ID DIRECTORS	13.	з Арені	r eignaturo required		DITIONS/CHANGES TO OFFICERS AND	DIRECTO	ORS IN 12	
TITLE	PTD			TIF			31110710,011711020	Change		
NAME				1.2 NAME					_	
STREET ADDRESS	1731 S.W. 84 COURT		1.3 \$7	REET A	DDRESS					
CITY-ST-ZIP	MIAMI FL 33155		1.4 CITY - ST - ZIP							
TITLE	<b>VP</b> SD	☐ DELETE 2		2.1 TITLE				☐ Chang	e 🔲 Addition	
NAME	Rodriquez, Jose		2.2 NAME							
STREET ADDRESS	1731 S.W. 84 COURT		2.3 STREET ADDRESS							
CITY-ST-ZIP	MIAMI FL		2. 4 CITY-ST-ZIP		- ZIP					
TITLE	D	☐ DELETÉ	3.1 TITLE					☐ Chang	e 🔲 Addition	
NAME	ROSALES, JOANY		3.2 NAME							
STREET ADDRESS	11 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		3.3 ST	3.3 STREET ADDRESS						
CITY-ST-ZIP	MIAMI FL 33155			TY-ST	-ZIP			<del></del>		
TITLE		☐ DELETE	4.1 TII					Change	e Addition	
NAME			4. 2 NAME							
STREET ADDRESS			4.3 STREET							
CITY-ST-ZIP		DEFETE	4.4 City-1		- ZIP				4 4 4 10	
TITLE	1		1	5.1 TITLE				Change	e 🔲 Addition	
NAME STORET ADDRESS			5.2 NA							
STREET ADDRESS					DDRESS					
CITY-ST-ZIP		☐ DELETE		TY-ST-	ZIP			Chase	a Balabban	
TITLE		€ DETELE	6.1 1(1					Change	e 🛄 Addition	
NAME STORES ASSESSED			6.2 NA		D. D					
STREET ADDRESS			6.3 ST	HEET A	DDRESS					

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.

SIGNATURE:

CITY-ST-ZIP

GENIHAH RODRIGUEZ

05/15/98 265-77.39