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

FILED Feb 04 1998 8:00am Secretary of State

1. Corporation Name # N950	00002474 (3)				
ASOCIACION MARANATHA, INC). 				
Principal Place of Business Mailing Address			t tamitiët ein intal Ditti ontit ontit estit estit ditti diett antil insit nidt lout		
19435 SW 117 CT MIAMI FL 33177	19435 SW 117 CT MIAMI FL 33177		3. Date Incorporated or Qualified 05/24/1995		
			4. FEI Number Applied For 65-0584295 Not Applicable		
2. Principal Place of Business 2a. Mailing Address 21			5. Certificate of Status Desired Section Fee Required		
Suite, Apt. #, etc. Suite, Apt. #, etc. 27			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
City & State	City & State		7. Is this nonprofit corporation a horneowners association?		
Zip Country 25	29 30	untry	Personal Property Tax due June 30. Yes No		
Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent		
		81	Name		
MORALES, MELANIA R 19435 SW 117 CT		82	Street Address (P.O. Box Number is Not Acceptable)		
MIAMI FL 33177		83			
		1 1_	FL		
Pursuant to the provisions of Sections 617.	0502 and 617.1508, Florida Statutes, the a	bove-	e-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

SIGNATURE	Signature, typed or printed name of registered agent an	d title if applicable. (NOTE	: Registered Agent signature requi	red when reinstating) DATE	-	
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	DELETE	1.1 TITLE	☐ Change	Addition	
NAME	MORALES, MELANIA R		1.2 NAME			
STREET ADDRESS	19435 SW 117 CT		1.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33177		1.4 CITY-ST-ZIP			
TITLE	VSD	DELETE	2.1 TITLE	" L Change	Addition	
NAME	MORALES, MARINO		2.2 NAME			
STREET ADDRESS	19435 SW 117 CT		2.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33177		2. 4 CITY-ST-ZIP			
TITLE	D	DELETE	3.1 TITLE	Change	Addition	
NAME	BIENVENIDO, MINAYA		3.2 NAME			
STREET ADDRESS	19435 SW 117 CT		3.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33177		3.4. CITY-ST-ZIP			
TITLE	TD	☐ DELETE	4.1 TITLE	☐ Change	Addition	
NAME	MORALES, WILMAN		4. 2 NAME			
STREET ADDRESS	19435 SW 117 CT		4.3 STREET ADDRESS	F = - Pure F = 2 # E +		
CITY-ST-ZIP	MIAMI FL 33177		4.4 CITY-ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE	☐ Change	Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP	<u> </u>		5.4 CITY-ST-ZIP			
TITLE		DELETE	6.1 TITLE	Change	Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY - ST - ZIP			6.4 CITY-ST-ZIP			

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.

GNATURE:

SIGNATURE: