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

DOCUMENT # N95000003459 (3)

COMMINIDAD ODISTIANA DE MIAMILIMO

FILED Apr 17 1998 8:00am Secretary of State

COMORIDAD CHISTIANA DE MIANII, INC.							
Principal Place of Business 13518 S.W. 114TH COURT MIAMI FL 33176-0833		Malling Address				r americat ded novel nicht entst aufer abeit der de in de in de in de in de in de	#!
		13518 S.W. 114TH COURT MIAMI FL 33176-0833			3. Date Incorporated or Qualified 07/21/1995		
						4. FEI Number Applied Fo	
2. Principal P	lace of Business	2a. Mailing Address				65-0595723 Not Applic	
21	idob of Dosmoso	26				5. Certificate of Status Desired See Regulred Fee Regulred	al
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			-	6. Election Campaign Financing \$5.00 May Be	
22		27				Trust Fund Contribution Added to Fees	
City & Stat	e	City & State				7. Is this nonprofit corporation a homeowners association?	
Zip	Country	28 Zip	Co	untry		Yes No	
24	25	29	30	Li ili y		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	
	9. Name and Address of Curre		1001	Τ		10. Name and Address of New Registered Agent	
				81	Name	Э	
SALGADO, JUAN R				82 Street Address (P.O. Box Number is Not Acceptable)			
	W.114TH COURT				L		
MIAMI F	. 33176-0833			83	1		
				84	City	FL 85 Zip Code	
11. Pursuant	to the provisions of Sections 617.05	02 and 617.1508, Florida Statu	les, the a	bove	Le-named	d corporation submits this statement for the purpose of changing its register	bere
office or r	egistered agent, or both, in the Stat- m familiar with, and accept the oblid	e of Florida. Such change was a pations of Section 617,0503. Ft	authorize orida Sta	d by	/ the corp	d corporation submits this statement for the purpose of changing its register proporation's board of directors. I hereby accept the appointment as registered	эd
SIGNATURE		,					
12.	Signature, typed or printed name of registered as			d Age	int signature	re required when reinstating) DATE	
TITLE		ND DIRECTORS DELETE	13.	TT. P		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Add	J!s!
NAME	PD SALGADO HIAN D	SALGADO, JUAN R		1.1 TITLE 1.2 NAME		Change Add	IIIIQII
STREET ADDRESS	13518 S.W. 114TH COURT				ADDRESS		
CITY-ST-ZIP	MIAMI FL 33176		1	HTY-S			
TITLE	VD	DELETE	2.1 T		,	☐ Change ☐ Add	Jilion
NAME	ZIRENA, JOSE C		2.2 N	IAME			
STREET ADDRESS	12234 S.W. 203RD ST.		2.3 S	TREET	ADDRESS		
CITY-ST-ZIP	MIAMI FL 33177		2.40	CITY - S	ST - ZIP		
TITLE	VD	☐ DELETE		3.1 TITLE		☐ Change ☐ Add	iition
NAME	HERNANDEZ, JUAN		3.2 N				
STREET ADDRESS	1640 S.W. 83 AVE. MIAMI FL				ADDRESS		
CITY-ST-ZIP TITLE	STD	☐ DELETE	3.4. C		ST-ZIP	☐ Change ☐ Add	iition
NAME	DIAZ, HUMBERTO			KAME		La biningo La rico	*******
STREET ADDRESS	10501 S.W. 108-A AVE. #213	J			ADDRESS		
CITY-ST-ZIP	MIAMI FL 33176		4.4 CITY				
TITLE		DELETE		5.1 TITLE		Change Add	iition
NAME			5.2 N	AME			
STREET ADORESS			5.3 S	TREET	ADDRESS		
CITY-ST-ZIP				ITY-S	T-ZIP		
TITLE		☐ DELETE	6.1 Ti			☐ Change ☐ Add	ition
NAME PAREST ARRESTOS			6.2 N				
STREET ADDRESS			■ 6.3 S	TAEET	ADDRESS	. 1	

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.

6.3 STREET ADDRESS