

**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 # N95000004136 (6)  
1. Corporation Name

IGLESIA CRISTIANA FE Y VIDA, INC.



Principal Place of Business: 125 CHURCH STREET VALRICO FL 33594  
Mailing Address: 2213 DUMBARTON WAY VALRICO FL 33594

3. Date Incorporated or Qualified: 08/29/1995  
3a. Date of Last Report

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21	26	59-3331054	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired	\$8.75 Additional Fee Required
22	27	<input type="checkbox"/>	
City & State	City & State	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
23	28	<input type="checkbox"/>	
Zip	Country	Zip	Country
24	25	29	30
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	

9. Name and Address of Current Registered Agent  
MORALES, VICTOR  
2213 DUMBARTON WAY  
VALRICO FL 33594

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City  
85 Zip Code  
FL

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 reappointing) DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '92	
TITLE	<del>Vice President</del> <input type="checkbox"/> DELETE	11 TITLE	D <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<del>Josefa E. Velasquez</del>	12 NAME	Jose Velasquez
STREET ADDRESS	<del>2213 Dumbarton Way</del>	13 STREET ADDRESS	2213 Dumbarton Way
CITY-ST-ZIP	<del>Valrico, FL 33594</del>	14 CITY-ST-ZIP	Valrico, FL 33594
TITLE	<del>Secretary</del> <input type="checkbox"/> DELETE	21 TITLE	<del>Amarilis Ruiz</del> <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<del>Amarilis Ruiz</del>	22 NAME	
STREET ADDRESS	<del>606 Avocado Dr.</del>	23 STREET ADDRESS	
CITY-ST-ZIP	<del>Seffner, FL 33594</del>	24 CITY-ST-ZIP	
TITLE	<del>President</del> <input type="checkbox"/> DELETE	31 TITLE	D <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<del>Jose Velasquez</del>	32 NAME	Amarilis Ruiz
STREET ADDRESS	<del>2213 Dumbarton Way</del>	33 STREET ADDRESS	606 Avocado Dr.
CITY-ST-ZIP	<del>Valrico, FL 33594</del>	34 CITY-ST-ZIP	Seffner, FL 33584
TITLE	<input type="checkbox"/> DELETE	41 TITLE	D <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		42 NAME	Josefa E. Velasquez
STREET ADDRESS		43 STREET ADDRESS	2213 Dumbarton Way
CITY-ST-ZIP		44 CITY-ST-ZIP	Valrico, FL 33594
TITLE	<input type="checkbox"/> DELETE	51 TITLE	
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	61 TITLE	1000018522 <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		62 NAME	-06/05/96--01078--032 5/1/96
STREET ADDRESS		63 STREET ADDRESS	***61.25
CITY-ST-ZIP		64 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: Jose Velasquez Jose Velasquez 3/4/96 (813)685-4990  
Date Daytime Phone #

CR2E037 (12/95)