

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997
AMOUNT DUE ON OR BEFORE 9/17/97: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

FILED
Aug 21 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N95000004412 (1)
1. Corporation Name

LUGO MINISTRIES INTERNATIONAL, INC.

Principal Place of Business

Mailing Address

328 MYRTLEWOOD RD.
MELBOURNE FL 32940

P.O. BOX 411044
MELBOURNE FL 32941

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
09/13/1995

3a. Date of Last Report
04/16/1996

4. FEI Number
59-3335048

Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☒ \$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current-year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 328 Myrtlewood Rd

26 Melbourne

22 Suite, Apt. #, etc.
Melbourne

27 Suite, Apt. #, etc.
P.O. Box 411044

23 City & State
FL

28 City & State
FL

24 Zip
32940

25 Country
Brevard

29 Zip
32941

30 Country
Brevard

g. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LUGO, JULIO A
328 MYRTLEWOOD RD.
MELBOURNE FL 32940

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE
NAME LUGO, JULIO A
STREET ADDRESS 328 MYRTLEWOOD RD.
CITY-ST-ZIP MELBOURNE FL 32940

1.1 TITLE D ☐ Change ☐ Addition
1.2 NAME JULIE Ann Lugo
1.3 STREET ADDRESS 328 Myrtlewood Rd
1.4 CITY-ST-ZIP MELBOURNE FL 32940

TITLE D ☐ DELETE
NAME LUGO, JAIME JR.
STREET ADDRESS 328 MYRTLEWOOD RD
CITY-ST-ZIP MELBOURNE FL 32940

2.1 TITLE D ☐ Change ☐ Addition
2.2 NAME LUGO, JAIME JR
2.3 STREET ADDRESS 328 Myrtlewood Rd
2.4 CITY-ST-ZIP MELBOURNE FL 32940

TITLE D ☐ DELETE
NAME SPITLER, JANET
STREET ADDRESS 3051 ROBERTSON RD
CITY-ST-ZIP GROVESPRING MO 65662

3.1 TITLE D ☐ Change ☐ Addition
3.2 NAME JANET SPITLER
3.3 STREET ADDRESS 3051 ROBERTSON RD.
3.4 CITY-ST-ZIP Grovespring, MO. 65662

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 REQUIRED

01/1/97

CR2E037 (4/97)