## FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION** ANNUAL REPORT



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

1996

DOCUMENT #
1. Corporation Name N95000005539 (0)

<b>MINISTERIO</b>	<b>INTERNACIONAL</b>	ďΑ	COSECHA".	INC.
MAINO FINA			OUCLUID,	1110.

Principal Place of Business

Mailing Address

MO EAST SETU STORET



HIALEAH FL 33013		HIALEAH FL 33013						
				3. Date Incorporated or C 11/22/1995	Qualified 3a. Da	te of Last Report		
	Place of Business E.25 ST.	2a. Mailing Address	CT	4. FEI Number	2107	Applied For		
	······································		5 S7.	65-0629	7/8/	Not Applicable		
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status De	esired	\$8.75 Additional Fee Required		
23 HIAL	City & State HIALEAH, FL 28 HIALEAH, F		FL	, =	6. Election Campaign Financing Trust Fund Contribution  \$5.00 May 8 Added to Fee			
Zip 24 330			Country 10 USA	8. This corporation has lia Florida Statutes	ability for intangible ta:			
	9. Name and Address of Currer	t Registered Agent		10. Name and Address of	of New Registered A	\gent		
			81 Nam	REYES HER	MFC			
REYES,	HERMES		82 Stree	Address (P.O. Box Number is Not	Acceptable)			
918 EAS	ST 25TH STREET			18 €. 25th S	8 E. 254 ST.			
HJALEAH	H FL 33013		83					
			B4 City	HIALEAH FI	FL	85 Zip Code 3 3 7 1 3		
11. Pursuant dr register familiar wi	to the provisions of Sections 617,0502 red agent or both, in the State of Florid ith, and accept the obligations of, Sect	and 617.1508, Florida Statutes, da. Such change was authorized l ion 617.0503. Florida Statutes	the above-named by the corporation	corporation submits this statement for s board of directors. I hereby accept	or the purpose of chain the appointment as	nging its registered office registered agent. I am		
SIGNATURE A	x Kujeme			a required when rainstating)	DATE			
12.	OFFICERS ANI		13.	ADD:TIONS/CHANGES		DIRECTORS IN 12		
TITLE	P.D.T	DELETE	1.1 TIFLE			Change Addition		
NAME	JORGE E. CABRERA		1.2 NAME		_			
STREET ADDRESS	10401 NW 310VE		1.3 STREET ADORESS					
CITY - ST- ZIP	10401 NW 3/AVE MIAMI PL. 33/47	•	1.4 CITY - ST - ZIP					
TITLE	N.W. D	□ DELETE	2 1 TITLE			Change Addition		
NAME	LUISA ESPERANZA C	ABRERA	2 2 NAME					
STREET ADDRESS	10401 NW 31 AYE	• •	2.3 STREET ADDRESS					
CITY-ST-ZIP	MIAMI FL. 3314	7	2 4 CITY - ST - ZIP					
TITLE	5. D	DELETE	3 1 TITLE			Change Addition		
NAME .	HERMES REYO	15	3 2 NAME "					
STREET ADDRESS	10401 NW 31 AVE	5	3.3 STREET ADDRESS					
CITY-ST-ZIP	MIAMI FL. 33	147.	34 CITY-ST-ZIP					
TITLE	77 0	DELETE	4 1 TITLE		C	Change Addition		
NAME	NORGE & CABRE	RA	4. 2 NAME					
STREET ADDRESS	10+01 NW 31AV	Ê.	4.3 STREET ADDRESS					
CITY - ST - ZIP	10+01 NW 31AV	47-	4.4 CITY - ST - ZIP					
TITLE	·	DELETE	5.1 TITLE		<u>, ,, ,, ,</u>	Change Addition		
NAME			5.2 NAME	<b>90000</b> : -06/19/96-	1000000 10_0000_			
STREET ADDRESS			5 3 STREET ADDRESS	***70,00	0105501	<sup>3</sup> . ~ ~ ~ ~		
CITY-ST-ZIP			5.4 CITY - ST - ZIP	*************************************		1218		
TITLE		DELETE	6 1 TITLE			Change   Audition		
NAME			6.2 NAME			~  4 \		
STREET ADDRESS			6.3 STREET ADDRESS	1		J		
CITY-ST-ZIP			64 CITY - ST - ZIP	1				
14. I do hereb	by certify that the information supplied v	vith this filing is voluntarily furnishe	ed and does not qu	alify for the exemption stated in Sec	tion 119.07(3)(k), Flori	da Statutes. I further		

In 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 the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name angled, or of an attachment with an address. oath; that I am an officer or director of appears in Block 12 or Block 13 if ch

SIGNATURE: 👱