

FILE NOW: FILING FEE IS \$61.25

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Jul 02 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N95000005711 (5)**

1. Corporation Name

IGLESIA PENTECOSTAL SENDERO DE LUZ, INC.



Principal Place of Business	Mailing Address
200 W 21 ST HIALEAH FL 33010 US	466 NE 210TH CIRCLE TERRACE APT.101 NO. MIAMI FL 33179

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

3. Date Incorporated or Qualified	12/04/1995
4. FEI Number	65-0627627
5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association?	<input type="checkbox"/> Yes <input type="checkbox"/> No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	<input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent
FLORES, RIGOBERTO PASTOR 466 NE 210TH CIRCLE TERRACE APT.101 NO. MIAMI FL 33179

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

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 reinstating) DATE _____

12. OFFICERS AND DIRECTORS	
TITLE	PD <input type="checkbox"/> DELETE
NAME	FLORES, RIGOBERTO PASTOR
STREET ADDRESS	200 W 21 ST
CITY-ST-ZIP	HIALEAH FL
TITLE	VD <input checked="" type="checkbox"/> DELETE
NAME	CASTRO, FEDERICO A
STREET ADDRESS	200 W 21 ST
CITY-ST-ZIP	HIALEAH FL
TITLE	SD <input type="checkbox"/> DELETE
NAME	ALONSO, MARTHA G
STREET ADDRESS	200 W 21 ST
CITY-ST-ZIP	HIALEAH FL
TITLE	TD <input type="checkbox"/> DELETE
NAME	RIVAS, MARITZA
STREET ADDRESS	200 W 21 ST
CITY-ST-ZIP	HIALEAH FL
TITLE	D <input type="checkbox"/> DELETE
NAME	ARGUELLO, ALEJANDRO
STREET ADDRESS	200 W 21 ST
CITY-ST-ZIP	HIALEAH FL
TITLE	D <input type="checkbox"/> DELETE
NAME	RODRIGUEZ, MIGUEL
STREET ADDRESS	200 W 21 ST
CITY-ST-ZIP	HIALEAH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	RUDY DELGADILLO
1.3 STREET ADDRESS	200 W 21 st.
1.4 CITY-ST-ZIP	HIALEAH FL.
2.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	JEANETT GUERRERO
2.3 STREET ADDRESS	200 w. 21 st.
2.4 CITY-ST-ZIP	HIALEAH, FL.
3.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	GERMAN REGIDOR
3.3 STREET ADDRESS	200 w. 21 st.
3.4 CITY-ST-ZIP	HIALEAH, FL.
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. 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.

SIGNATURE: *R. Flores*

3-21-98

CR2E037 (10/97)