

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997
AMOUNT DUE ON OR BEFORE 9/17/97: \$61.26 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.26).

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # N96000000805 (9)

1. Corporation Name

EL FARO CENTRO CRISTIANO, INC.

Principal Place of Business

1299 SW 112TH WAY
FT. LAUDERDALE FL 33325

Mailing Address

1299 SW 112TH WAY
FT. LAUDERDALE FL 33325

FILED
Aug 28 1997 8:00am
Secretary of State

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
02/15/1996

3a. Date of Last Report
N/A

2. Principal Place of Business

21 1299 SW 112th Way

2a. Mailing Address

26 Same

4. FEI Number

65-0773122

Applied For

Not Applicable

Suite, Apt. #, etc.

22 N/A

Suite, Apt. #, etc.

27

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

City & State

23 Ft. Lauderdale, FL

City & State

28

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be Added to Fees

Zip

24 33325

Country

25

Zip

29

Country

30

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GONZALEZ, JUAN
1299 SW 112TH WAY
FT. LAUDERDALE FL 33325

81 Name

Same

82 Street Address (P.O. Box Number is Not Acceptable)

83 700002281227--8

84 City

*****61.25 FL *****61.25

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

TITLE ☐ DELETE

NAME D
GONZALEZ, JUAN
STREET ADDRESS 1299 SW 112TH WAY
CITY-ST-ZIP FT. LAUDERDALE FL 33325

TITLE ☐ DELETE

NAME D
LOBO, CAMILO
STREET ADDRESS 1299 SW 112TH WAY
CITY-ST-ZIP FT. LAUDERDALE FL 33325

TITLE ☒ DELETE

NAME D
RODRIGUEZ, TONY
STREET ADDRESS 1299 SW 112TH WAY
CITY-ST-ZIP FT. LAUDERDALE FL 33325

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME Gonzalez, Juan
1.3 STREET ADDRESS 1299 SW 112th Way
1.4 CITY-ST-ZIP Ft. Lauderdale, FL 33325

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME Lobo, Camilo
2.3 STREET ADDRESS 1299 SW 112th Way
2.4 CITY-ST-ZIP Ft. Lauderdale, FL 33325

3.1 TITLE ☐ Change ☒ Addition

3.2 NAME Gonzalez, Sarah
3.3 STREET ADDRESS 1299 SW 112th Way
3.4 CITY-ST-ZIP Ft. Lauderdale, FL 33325

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 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 information indicated on this annual report or supplemental annual report is true and accurate. I am an officer or director of the corporation or the receiver or trustee empowered to file 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

8/1/97

CR2E037 (4/97)