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May 19 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 # N96000001889

1. Corporation Name

Radio Amor, Poder Y Gracia, Inc.

Principal Place of Business	Mailing Address
2929 Floyd Street Sarasota, FL 34239	2929 Floyd Street Sarasota, FL 34239

3. Date Incorporated or Qualified: April 08, 1996
3a. Date of Last Report: N/A

2. Principal Place of Business
21: 910 Martin Luther
22: Suite, Apt. #, etc: King Jr. Blvd.
23: City & State: Tampa, FL
24: Zip: 33603
25: Country: USA

2a. Mailing Address
26: 910 Martin Luther
27: Suite, Apt. #, etc: King Jr. Blvd.
28: City & State: Tampa, FL
29: Zip: 33603
30: Country: USA

4. FEI Number: [ ] Applied For [X] 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 has liability for intangible tax under s. 199.032, Florida Statutes [ ] Yes [XX] No

9. Name and Address of Current Registered Agent

Rev. William V. Ramos
2929 Floyd Street
Sarasota, FL 34239

10. Name and Address of New Registered Agent

81 Name: Registered Corporate Agents, Inc.
82 Street Address (P.O. Box Number is Not Acceptable): 612 S. Greenwood Avenue
83:
84 City: Clearwater FL 85 Zip Code: 34616

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: Peggy Sue Hynson, President — Peggy Sue Hynson — 5/13/97
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	P Rev. William V. Ramos 2929 Floyd Street Sarasota, FL 34239	[X] DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	P Rev. Alberto Acosta 910 Martin Luther King Jr. Blvd. Tampa, FL 33603	[X] Change [ ] Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S/T Elias Ortiz 4901 North 19th Street Tampa, FL 33610	[ ] DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP		[ ] Change [ ] Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Rev. Julio Rosario, Jr. P.O. Box 7449 Tampa, FL 33673	[X] DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	D Eva Acosta 910 Martin Luther King Jr. Blvd. Tampa, FL 33603	[X] Change [ ] Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Rev. Eugenio Pagan 815 E. Ida Street Tampa, FL 33603	[ ] DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP		[ ] Change [ ] Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		[ ] DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	5-19-97	[ ] Change [ ] Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		[ ] DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	000002196460 -05/30/97--01077--027 ***61.25	[ ] Change [ ] Addition

CR2E037 (9/96)

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: Alberto Acosta — 5/13/97 — 582-54-3962
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #