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May 16 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 # N96000002228 (2)

1. Corporation Name

IGLESIA EVANGELICA MONTE SINAI, INC.



Principal Place of Business

Mailing Address

4790 N.W. 7 STREET
MIAMI FL 33126

4790 N.W. 7 STREET
MIAMI FL 33126-2200

3. Date Incorporated or Qualified
04/24/1996

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

65-0694507

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

6. Certificate of Status Desired

8.75 Additional Fee Required

City & State

City & State

23

28

8. Election Campaign Financing Trust Fund Contribution

5.00 May Be Added to Fees

Zip

Country

Zip

Country

24

25

29

30

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ROSTRAN, JOSE A
4790 N.W. 7 STREET
MIAMI FL 33126

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 reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME ROSTRAN, JOSE A
STREET ADDRESS 4790 N.W. 7 STREET
CITY-ST-ZIP MIAMI FL 33126

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE VD
NAME CASTILLO, SILVIO
STREET ADDRESS 4790 N.W. 7 STREET
CITY-ST-ZIP MIAMI FL 33126

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE SD
NAME ROSTRAN, ZOBAYDA
STREET ADDRESS 4790 N.W. 7 STREET
CITY-ST-ZIP MIAMI FL 33126

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE TD
NAME CASTILLO, ELIDA
STREET ADDRESS 4790 N.W. 7 STREET
CITY-ST-ZIP MIAMI FL 33126

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

TITLE D
NAME CARRILLO, BALTAZAR
STREET ADDRESS 4790 N.W. 7 STREET
CITY-ST-ZIP MIAMI FL 33126

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
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: Jose Antonio Rostran

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/25/97, (305) 774-9882

Date

Daytime Phone # 0028379

CR2E037 (9/96)