


FILE NOW: FILING FEE IS \$61.25

FILED
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
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DOCUMENT # **N96000003025 (1)**

1. Corporation Name

**MISSION OF JESUS DISCIPLES PENTECOSTAL CHURCH, I
NC.**



Principal Place of Business	Mailing Address
3545 NW 81 TERR MIAMI FL 33147	3545 NW 81 TERR MIAMI FL 33147-4519

3. Date Incorporated or Qualified 06/05/1996	3a. Date of Last Report
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2. Principal Place of Business	2a. Mailing Address
21 8640 NW 22 Ave	26
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22 Attn:	27
City & State	City & State
23 Florida, Miami	28
Zip	Country
24 33147	25 Dade
29	30

4. FEI Number 65-0669280	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input checked="" type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent	
VALDEZ-MAINER, KATHERINE 3545 NW 81-TERR MIAMI FL 33147	

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
FL	

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 *Katherine Valdez-Mainer* **Katherine Valdez-Mainer** **4/29/97**
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS	
TITLE	PD <input type="checkbox"/> DELETE
NAME	VALDEZ-MAINER, KATHERINE
STREET ADDRESS	3545 NW 81 TERR
CITY-ST-ZIP	MIAMI FL 33147
TITLE	SD <input type="checkbox"/> DELETE
NAME	TUCKER, MONICA
STREET ADDRESS	3111 NW 66 ST
CITY-ST-ZIP	MIAMI FL 33142
TITLE	TD <input type="checkbox"/> DELETE
NAME	MARTIN, CLEMENTE
STREET ADDRESS	5905 NW 3 AVE
CITY-ST-ZIP	MIAMI FL 33150
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	800002198498
3.3 STREET ADDRESS	-06/03/97--01003--003
3.4 CITY-ST-ZIP	***5.00
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	100002198491
4.3 STREET ADDRESS	-06/03/97--01003--002
4.4 CITY-ST-ZIP	***8.75
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	600002198486
6.3 STREET ADDRESS	-06/03/97--01003--001
6.4 CITY-ST-ZIP	***61.25

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 *Katherine Valdez-Mainer* **Katherine Valdez-Mainer** **4/29/97**

CR2E037 (9/96)