

FILE NOW: FILING FEE IS \$61.25

FILED

Aug 04 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 # N96000003893 (2)

1. Corporation Name

THE LORD'S ANGEL MINISTRIES, INC.

Principal Place of Business

Mailing Address

13416 SOUTHWEST 112 COURT
MIAMI FL 33176

13416 SOUTHWEST 112 COURT
MIAMI FL 33176-5310



3. Date Incorporated or Qualified

07/24/1996

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

AMERILAWYER CHARTERED
343 ALMERIA AVENUE
CORAL GABLES FL 33134

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE

NAME ANGEL, LUIS M
STREET ADDRESS 13416 SOUTHWEST 112 COURT
CITY-ST-ZIP MIAMI FL 33176

1.1 TITLE ☐ Change ☐ Addition

TITLE STD ☐ DELETE

NAME ANGEL, DIANA
STREET ADDRESS 13416 SOUTHWEST 112 COURT
CITY-ST-ZIP MIAMI FL 33176

2.1 TITLE ☐ Change ☐ Addition

TITLE D ☐ DELETE

NAME MORENO, AURA
STREET ADDRESS 13416 SOUTHWEST 112 COURT
CITY-ST-ZIP MIAMI FL 33176

3.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
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 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

[Handwritten Signature] - Diana T. Angel 7-22-97 351-1011 (305)

CR2E037 (9/96)