

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



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

FILED
Aug 26 1998 8:00am
Secretary of State

DOCUMENT #, N97000001092 (2)

1. Corporation Name

MINISTERIO JUVENTUD DEL MUNDO ENTERO, INC.



Principal Place of Business

Mailing Address

POST OFFICE BOX 2264
PINELLAS PARK FL

POST OFFICE BOX 2264
PINELLAS PARK FL

3. Date Incorporated or Qualified

02/26/1997

4. FEI Number

Applied For

☒ Not Applicable

2. Principal Place of Business

21 4101 5TH AVE. NO.

Suite, Apt. #, etc.

22

2a. Mailing Address

26 P.O. Box 2264

Suite, Apt. #, etc.

27

City & State

23 ST. PETERSBURG, FL.

Zip

24 33714

Country

25 US

City & State

28 PINELLAS PARK, FL.

Zip

29 33780

Country

30 US

5. Certificate of Status Desired ☒ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

7. Is this nonprofit corporation a homeowners association?
☐ Yes ☒ No

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

RAMOS, WILLIAM V REV.
2066 8TH STREET
SARASOTA FL 34237

10. Name and Address of New Registered Agent

81 Name

PEDRO J. TORRES

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

83 4801 7TH AVE. NO.

84 City

ST. PETERSBURG

FL

85 Zip Code

33713

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 EXECUTIVE DIRECTOR ☒ DELETE

NAME REV. WILLIAM RAMOS

STREET ADDRESS 2066 8TH STREET

CITY-ST-ZIP SARASOTA, FL. 34237

TITLE COUNSELOR ☒ DELETE

NAME JULIO E. MARTINEZ

STREET ADDRESS 6511 TRAVIS BLVD.

CITY-ST-ZIP TAMPA, FL. 33610

TITLE EXECUTIVE SECRETARY ☒ DELETE

NAME CARMEN J. MARTINEZ

STREET ADDRESS 501 93 AVE. NO.

CITY-ST-ZIP ST. PETE. FL.

TITLE CUSTOM DESIGN ☒ DELETE

NAME IVAN QUINONEZ

STREET ADDRESS 4808 MALARKEY ST.

CITY-ST-ZIP ORLANDO, FL. 32808

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 EXECUTIVE DIRECTOR - D ☐ Change ☒ Addition

1.2 NAME REV. PEDRO J. TORRES

1.3 STREET ADDRESS 4801 7TH AVE. NO.

1.4 CITY-ST-ZIP ST. PETERSBURG, FL. 33713

2.1 TITLE COUNSELOR - T ☐ Change ☒ Addition

2.2 NAME JOSE * MARITZA VARGAS

2.3 STREET ADDRESS 3711 MAKINLEY CT. #8

2.4 CITY-ST-ZIP TAMPA, FL. 33614

3.1 TITLE COORDINATORS - T ☐ Change ☒ Addition

3.2 NAME OSCAR * LOURDES RODRIGUEZ

3.3 STREET ADDRESS 6447 WILLOW WOOD LN.

3.4 CITY-ST-ZIP TAMPA, FL. 33634

4.1 TITLE EXECUTIVE SECRETARY - D. ☐ Change ☒ Addition

4.2 NAME HEIDI BRAJO

4.3 STREET ADDRESS 6314 4ST. NO.

4.4 CITY-ST-ZIP ST. PETERSBURG, FL.

5.1 TITLE COLLABORATOR ☐ Change ☒ Addition

5.2 NAME HILL MARTINEZ

5.3 STREET ADDRESS 6314 4ST. NO.

5.4 CITY-ST-ZIP ST. PETERSBURG, FL.

6.1 TITLE EXECUTIVE DIRECTOR - T ☐ Change ☒ Addition

6.2 NAME WILLIAM RODRIGUEZ

6.3 STREET ADDRESS 3620 41 AVE. NO.

6.4 CITY-ST-ZIP ST. PETERSBURG, FL. 33714

14. I 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: REV. PEDRO J. TORRES

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7-8-98

(813) 321-2597

CR2E037 (5/98)