

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).

FILED
Aug 13 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	---

DOCUMENT # N97000005249 (4)

1. Corporation Name

IGLESIA CRISTIANA NUEVA UNION, INC.

Principal Place of Business

Mailing Address

12 N.W. 1ST AVE. #UP
DANIA FL 33004

P.O. BOX 1434
DANIA FL 33004

3. Date Incorporated or Qualified

09/15/1997

4. FEI Number

65-0796119

Applied For

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

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

2. Principal Place of Business

21 same

2a. Mailing Address

26 same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

9. Name and Address of Current Registered Agent

SANTOS, MARY ANN
15 N.E. 27TH DR.
WILTON MANORS FL 33305

10. Name and Address of New Registered Agent

81 Name

Maria Del C. Rivera

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

258 S.W. 9th Street

83

84 City

Dania

FL

85 Zip Code

33004

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: Maria Del C Rivera

Signature, typed or printed name of registered agent and title if applicable.

Maria Del C. Rivera

8-10-98

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

P Luis Martinez
222 SW 3 STREET
Dania FL 33004

☐ DELETE

V William Martinez
319 W Dixie Hwy
Dania FL 33004

☐ DELETE

S Janet Salva
237 SE Park St Apt C
Dania FL 33004

☐ DELETE

T Tammy Martinez
222 SW 3 ST
Dania, FL 33004

☐ DELETE

TR Adelicia Nieves
319 W Dixie Hwy
Dania FL 33004

☐ DELETE

TR David Santos
258 SW 9th ST
Dania FL 33004

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

TR
Mary Ann Santos
258 SW 9th ST
Dania FL 33004

☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

TR
German Diaz
237 SE Park ST Apt C
Dania FL 33004

☐ Change ☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

8-10-98

CR2E037 (5/98)