

FILED
Apr 19, 1999 8:00 am
Secretary of State

04-19-1999 90016 037 ****75.00

NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N98000002085

1. Corporation Name
IGLESIA DE JESUCRISTO "LA SANA DOCTRINA" MINISTE RIO INTERNACIONAL INC.



Principal Place of Business 5462 SW 127TH CT MIAMI FL 33175-6227	Mailing Address 5462 SW 127TH CT MIAMI FL 33175-6227
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2. Principal Place of Business 21 14150 SW 84 ST	2a. Mailing Address 28 14150 SW 84 ST	3. Date Incorporated or Qualified 04/10/1998
Suite, Apt. #, etc. 22 F 208	Suite, Apt. #, etc. 27 F 208	4. FEI Number 05-0831344
City & State 23 MIAMI FL	City & State 28 MIAMI FL	5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required
Zip 24 33183	Country 25 U.S.A	6. Election Campaign Financing Trust Fund Contribution <input checked="" type="checkbox"/> \$5.00 May Be Added to Fees
Zip 29 33183	Country 30 U.S.A	

9. Name and Address of Current Registered Agent NEVOT, LAZARO 5462 SW 127TH CT MIAMI FL 33175-6227	81 Name NEVOT, LAZARO
	82 Street Address (P.O. Box Number is Not Acceptable) 14150 SW 84 ST F 208
	83
	84 City MIAMI FL 85 Zip Code 33183

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 *Lazaro Nevot* DATE **4-13-99**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE P	<input type="checkbox"/> DELETE	1.1 TITLE P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME NEVOT, LAZARO		1.2 NAME NEVOT LAZARO	
STREET ADDRESS 5462 SW 127TH CT		1.3 STREET ADDRESS 14150 SW 84 ST	
CITY-ST-ZIP MIAMI FL 33175-6227		1.4 CITY-ST-ZIP MIAMI FL 33183	
TITLE V	<input type="checkbox"/> DELETE	2.1 TITLE V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME NEVOT, ROSARIO		2.2 NAME NEVOT ROSARIO	
STREET ADDRESS 5462 SW 127TH CT		2.3 STREET ADDRESS 14150 SW 84 ST	
CITY-ST-ZIP MIAMI FL 33175-6227		2.4 CITY-ST-ZIP MIAMI FL 33183	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE T	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME AMERICA CARMONA	
STREET ADDRESS		3.3 STREET ADDRESS 13708 SW 9 ST	
CITY-ST-ZIP		3.4 CITY-ST-ZIP MIAMI FL 33180	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE T	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME SONIA BENK	
STREET ADDRESS		4.3 STREET ADDRESS 1567 SW 136 PLACE	
CITY-ST-ZIP		4.4 CITY-ST-ZIP MIAMI FL 33184	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE T	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME ZAIDA F. MORALES	
STREET ADDRESS		5.3 STREET ADDRESS 1280 SW 142 AVE	
CITY-ST-ZIP		5.4 CITY-ST-ZIP MIAMI FL 33184	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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, with all other like empowered.

SIGNATURE: *Lazaro Nevot* DATE **4-13-99** (305) 388-4688

CR2E037 (1/98)