NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Feb 22, 1999 8:00 am Secretary of State

02-22-1999 90065 048 ****61.25

DOCUMENT # N98000004469

MOISES' LITTLE ARK CHILD CARE AND PRESCHOOL, INC							. :			
Principal Place of Business Mailing Address						. •		*		
1050 WEST 23RD ST. 1050 WEST 23RD ST. HIALEAH FL 33010 HIALEAH FL 33010										
Principal Place of Business 2a. Mailing Address						3. Date Incorporate 08/04/1998	ed or Qualifed			
21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. 27						4. FEI Number	1854946	App	olied For Applicable	
27 27						5. Certifcate of Star	tus Desired	\$8.75 A		
Zip 24	Country Zip		Country 30	Country 30		6. Election Campai Trust Fund Cont	* 11	\$5.00 i Added to	. ,	
	9. Name and Address of Curre	nt Registered Agent				10. Name and Add	ress of New Register	ed Agent		
			81	Name			•			
RIVERO, LIDIA 7431 WEST 29TH WAY			82	Street	Address	ddress (P.O. Box Number is Not Acceptable)				
HIALEAH FL 33018			83	3	···			•		
IIIALLIAI	1 2 00010		84	City			F	85 Zip C	ode	
office or I	to the provisions of Sections 617.05 registered agent, or both, in the State am familiar with, and accept the obliga- Signature, typed or printed name of registered age	of Florida. Such change was a ations of, Section 617.0503, Flo	utnorizea di	the corp s.	oration s	nen reinstating)	DATE	pointment as reg		
12.	OFFICERS AND DIRECTORS		13.	13.		ADDITIONS/CHA	NGES TO OFFICERS			
TITLE	P DELETE		1.1 TITLE	1.1 TITLE				Change	☐ Addition	
NAME	RIVERO, EULOGIO REV.			1.2 NAME					1	
STREET ADDRESS				T ADDRESS			•			
CITY-ST-ZIP	HIALEAH FL 33018			1.4 CITY-ST-ZIP				Change	Addition	
TITLE	D DELETE		1	2.1 TITLE			•	□ onange		
NAME	RIVERO, LIDIA			2.2 NAME		•			İ	
STREET ADDRESS				2.3 STREET ADDRESS			•			
CITY-\$T-ZIP	HIALEAH FL 33018 DS DELETE			2. 4 CITY-ST-ZIP				Change	Addition	
TITLE	RIVERO, FRANCES J		i i	3.2 NAME			•	•	-	
NAME STREET ADDRESS	aman late north AT			3.3 STREET ADDRESS						
CITY-ST-ZIP	HIALEAH FL		3.4. CITY-				. •			
TITLE	DT DELETE		4.1 TITLE					Change	☐ Addition	
NAME	PORTELA, GLADYS E		4. 2 NAME	4. 2 NAME						
STREET ADDRESS 6421-W. 22ND COURT			4.3 STREE	4.3 STREET ADDRESS 2		853 N.W	19 st nes, FL			
CITY-ST-ZIP - HIALEAH FL 33016				4.4 CITY-ST-ZiP		Mbroke Pil	nes, FL,	33029		
TITLE	DELETE		5.1 TITLE	5.1 TITLE		<u> </u>		☐ Change	Addition	
NAME			5.2 NAME]					
STREET ADDRESS	 		5.3 STREE	ET ADDRESS	;					
CITY-ST-ZIP			5.4 CITY-	ST-ZIP			· · · · · · · · · · · · · · · · · · ·			
TITLE	DELETE		6.1 TITLE	6.1 TITLE				☐ Change	☐ Addition	
NAME			6.2 NAME]				1	

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 suppliemental 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 that god, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE

STREET ADDRESS

CITY-ST-ZIP