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Secretary of State

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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N98000005747

1. Corporation Name
MINISTERIO INTERNACIONAL CRISTIANO OF HOMESTEAD INC.

Principal Place of Business 30305 S.W. 154 CT. HOMESTEAD FL 33033	Mailing Address 30305 S.W. 154 CT. HOMESTEAD FL 33033
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29	3. Date Incorporated or Qualified 10/06/1998	4. FEI Number 65-0882485 Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	

9. Name and Address of Current Registered Agent PEREZ, PILAR 30305 S.W. 154 CT. HOMESTEAD FL 33033	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code FL
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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	DI VT <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		1.2 NAME	OCLIDIA CUNDIS
STREET ADDRESS		1.3 STREET ADDRESS	15800 SW. 304 ST.
CITY-ST-ZIP		1.4 CITY-ST-ZIP	HOMESTEAD, FL 33033
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	DIVP <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		2.2 NAME	MARCIA PALMAS
STREET ADDRESS		2.3 STREET ADDRESS	15311 SW. 305 ST.
CITY-ST-ZIP		2.4 CITY-ST-ZIP	HOMESTEAD, FL 33033
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	DIVS <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		3.2 NAME	JOSE QUINTANA
STREET ADDRESS		3.3 STREET ADDRESS	11965 SW. 185 TERR.
CITY-ST-ZIP		3.4 CITY-ST-ZIP	PELLINE, FL 33177
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	P <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		4.2 NAME	PILAR PEREZ
STREET ADDRESS		4.3 STREET ADDRESS	30305 SW. 154 CT.
CITY-ST-ZIP		4.4 CITY-ST-ZIP	HOMESTEAD, FL 33033
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	TIS <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		5.2 NAME	REYNALDO PEREZ
STREET ADDRESS		5.3 STREET ADDRESS	30305 SW. 154 CT.
CITY-ST-ZIP		5.4 CITY-ST-ZIP	HOMESTEAD, FL 33033
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: SIGNATURE REQUIRED **REYNALDO PEREZ** **2-15-99** **(305) 245-5501**
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E037 (11/98)