NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N9800005898

MINISTERIO EVANGELISTICO Y MISIONERO, LUZ Y VIDA ., INC.

Principal Place of Business

Mailing Address

Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90088 036 ****61.25

2828 SANTA B CAPE CORAL	garbara BLVD. Fl 33914	2828 SANTA BARBARA (H.V.D CAPE CORAL FL 33914),			
2. Principal Pi	lace of Business	2a. Mailing Address		3. Date incorporated or Qualifed		
21 2828	SANTABARBAR Blue	1, 28 28 28 panter 1	sar bara	10/15/1998 4. FEI Number		priled For
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		4. Fridaine		ot Applicable
22		City & State				Additional
23 60 12	COROL Florida		Torida	5. Certificate of Status Desired	Fee Re	
Zip	Country	Zip	Country	6. Election Campaign Financing	1 1	May Be to Fees
24 339·		29 339 14 30	lee	Trust Fund Contribution 10. Name and Address of New R		417005
	9. Name and Address of Curren	Registered Agent	81 Name	10. Name and Address of New R	edistant a whate	
			o i Hame			
SALAS, PI	EUTARCO		82 Street Aridress (P.O. Bo): Number is Not Acceptable)			
2828 SAN	ita barbara blvi).		83	, <u> </u>		
CAPE CO	RAL FL 33914		83			i
			84 City	. <u></u>	FI 85 Zip	Code
-44-5	the sections of C. Hone 617 050	and 617 1508 Elorida Statutes	the above-pamed	corporation submits this statement for the	purpose of changing its	egistered
office or r	registered agent, or both, in the State of familiar with, and except the obligation	OT FIONISA. SUICII CINARIUS WAS AULI	IOUXBU DY AUG COIDO	nition's board of directors. I hereby accep	t the appointment as re	gistered
SIGNATURE			ogislered Agent signature (1	of lined when reinstability	DATE	\a
12.		DIRECTORS.	13.	ADDITIONS/CHANGES TO OF	ICERS AND DIRECTO	DRS IN 12
me	DIRECTOY /PT	STOCK DELETE	1.1 TITLE	secretary / Than	SUTEY Change	☐ Addition ☐
TITLE	DIRECTOR PP	_Q_S	1.1 TITLE 1.2 NAME	luz & Galac	-	I
NAME	DINTAYON SOL	_Q_S	1.2 NAME 1.3 STREET ADDRESS	Luz E salas 2828 Santa Bayba	ra BLUD	I
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14. I herety 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 path; 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.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP