

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003357

FILED
Apr 15, 2004
Secretary of State

Entity Name: SAN FRANCISCO DE ASIS EPISCOPAL CHURCH, INC.

Current Principal Place of Business:

15650 MIAMI LAKEWAY NORTH
MIAMI LAKES, FL 33014

New Principal Place of Business:

Current Mailing Address:

9600 NW 25TH ST
STE 3-F
MIAMI, FL 33172

New Mailing Address:

2441 N.W. 93 AVE.
STE 101
MIAMI, FL 33172

FEI Number: 65-0923657

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MESA, MANUEL ARTHUR ESQ.
44 W FLAGLER ST 1575
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PERUYERO, ORLANDO
Address: 15650 MIAMI LAKEWAY NORTH
City-St-Zip: MIAMI LAKES, FL 33014

Title: D () Delete
Name: MESA, MANUEL G
Address: 15650 MIAMI LAKEWAY NORTH
City-St-Zip: MIAMI LAKES, FL 33014

Title: D () Delete
Name: PERUYERO, MARA
Address: 15650 MIAMI LAKEWAY NORTH
City-St-Zip: MIAMI LAKES, FL 33014

Title: D () Delete
Name: PERUYERO, BRAULID
Address: 15650 MIAMI LAKEWAY NORTH
City-St-Zip: MIAMI LAKES, FL 33014

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MANUEL G. MESA

D

04/15/2004

Electronic Signature of Signing Officer or Director

Date