FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT** 1997



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # p96000082802 (5)
1. Corporation Name CHRISTIAN NETWORK COMMUNICATIONS, INC.

FILED Aug 07 1997 8:00am Secretary of State

Principal Place of Business Mailing Address						
			20 044			
8457 S.W. 132 Street 8457 S.W. 13 Miami, FL 33156 Miami, FL 33						
razam.	1, 12 //1/0	racont , rac	,) 1,)©	3. Date Incorporated or Qualified 10/8/96	3a. Date of Last Report 4/1/97	
2. Principal	Place of Business	2a. Mailing Address		4. FEI Number	Applied For	
21		26		65-0708181	Not Applicable	
Suite, Apt	t. #, etc.	Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22		27		5. Definicate of diatus Desired	Fee Required	
City & Sta	ale ·	City & State		6. Election Campaign Financing	\$5.00 May Be	
Zip	Country	Z _{ID}	Country	Trust Fund Contribution	Added to Fees	
24	25	29	30	This corporation has liability for Florida Statutes	under s. 199.032, Yes No	
=:-	9. Name and Address of Currer		1001	10. Name and Address of New R		
Q1 Nome						
ANDA	, MAURICIO		62 Street Add	ROBERTO E. SUAREZ		
285 8	SUNRISE BLVD. APT. 7	1	OZ OTICET AUG	Street Address (P.O. Box Number is Not Acceptable) 765 N.W. 122ND. Court		
Key I	Biscayne, FL 33149		83			
	_		84 City		er Zin Code	
		$d \perp c$	M3	IAMI	FL 85 33182	
11. Pursuant office or	t to the provisions of Sections 607.0 50 registered agent, or both, in the State	and 607.1508 Florida Stati	ules, the above-named cor	poration submits this statement for the	purpose of changing its registered	
agent. L	am familiar with and accept the oblig-	atemo of Section 607 9505 A	lorida Statutes.	polation's board of directors. I hereby acce	pt the appointment as registered	
SIGNATURE			has been a second			
12.	Signalire, typod o printed name o registered ago OFFICERS ANI		D1E: Registored Agent signature requ	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12	
TITLE	President	DELETE	1.1 TITLE	NOSTRENA, OFFICIAL CONTROL OF THE	Change Addition	
NAME	ANDA, MAURICIO	••	1.2 NAME			
STREET ADDRESS	285 SUNRISE BLVD. A	PT 7	1.3 STREET ADDRESS			
CITY-ST-ZIP	KEY BISCAYNE, FL 33		1.4 CITY-ST-ZIP			
TITLE	Vice-President	DELETE	2.1 TITLE		☐ Change ☐ Addition	
NAME	EDUARDO JIMENEZ		2.2 NAME			
STREET ADDRESS	9201 S.W. 105 Stree	t	2.3 STREET ADDRESS			
CITY-ST-ZIP	Wiemi FL 33176 Vice- President	☐ DELETE	2. 4 CITY-ST-ZIP			
TITLE		. LI DELETE	311ITLE		☐ Change ☐ Addition	
NAME CTOSET ADDRESS	ROBERTO E. SUAREZ	DTP	32 NAME			
CITY-ST-ZIP	765 N.W. 122ND. COU MIAMI: FL 33182	UΙ	3 3 STREET ADDRESS			
TITLE	L_ ' ' '	☐ DELETE	3 4. CITY - ST - ZIP 4 1 TITLE		Change Addition	
NAME	Treasurer ANDRES I. RUIZ		4. 2 NAME		E change E vogition	
	Ship o W 420 Chann	+	4.3 STREET ADDRESS			
CITY-ST-ZIP	8457 S.W. 132 Stree	U	4.4 C(1)Y-S1-ZIP			
TITLE	Secretary	☐ DELETE	5.1 TITLE		Change Addition	
NAME	IVONNE SUAREZ		5 2 NAME		105	
STREET ADDRESS	765 N.W. 122ND. Cou	rt	5 3 STREET ADDRESS		۲ <u>۶</u> . ر	
CITY-ST-ZIP	Miami, FL 33182	·····	5.4 CITY - ST - ZIP		· · · · · · · · · · · · · · · · · · ·	
TITLE		DELETE	6 1 TITLE		Change Addition	
NAME			6.2 NAME	1 000022 -08/08/9701	51211 004005	
STREET ADDRESS	1 / /	1	6.3 STREFT ADDRESS	-U8/U8/3(UI	UU 4 UU3	
CITY-ST-ZIP	by cartify that the oformation a finalise	t with this ding also not	6.4 City-St-7IP	***81.25	- 16	
information	on indicated on this antiual report or s	unatemertal annual report is	true and accurate and that	d in Section 119.07(3)(i), Florida Statute t my signature shall have the same legi rt as required by Chapter 607, Florida 9	is. I further certify that the all effect as if made under oath; that	
l am an c appears	officer or director of the comporation of in Block 12 by Block 13th oberration or	The resolver or flustee empo	wered to execute this repo	rt as required by Chapter 607, Florida s	Statutes; and that my name	

OFFICER OR DIRECTOR