

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

FILED
Jun 02 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000097033 (0)

1. Corporation Name

CENTRO DE DESARROLLO CRISTIANO BETHEL, INC.



Principal Place of Business

1455 W FLAGLER ST
MIAMI FL 33135

Mailing Address

1455 W FLAGLER ST
MIAMI FL 33135-2208

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

3. Date Incorporated or Qualified

12/02/1996

3a. Date of Last Report

4. FEI Number

65-0714699

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution



\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes



Yes



No

9. Name and Address of Current Registered Agent

PRATS, GABRIEL
151 MAJORCA AVE
SUITE C
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PCD
MURRAY, RAMON ANTONIO
1455 W FLAGLER ST
MIAMI FL 33135

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
FUENTES, DAVID
1455 W FLAGLER ST
MIAMI FL 33135

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
MURRAY, ALTAGRACIA
1455 W FLAGLER ST
MIAMI FL 33135

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
PEREZ, ARMANDO
1455 W FLAGLER ST
MIAMI FL 33135

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
RIOS, DOUGLAS M
1455 W FLAGLER ST
MIAMI FL 33135

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
SOTO, ISRAEL
1455 W FLAGLER ST
MIAMI FL 33135

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
☐ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP
☐ Change ☐ Addition

14. I do 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

[Signature]

CR2E034 (9/96)