

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **F92000000109 (0)**

1. Corporation Name
MINISTERIO EL CAMINO, INC.



Principal Place of Business: **143 HIBISCUS LANE, KISSIMMEE FL 34743**
Mailing Address: **MINISTERIO EL CAMINO, INC. P.O. BOX 450278, KISSIMMEE FL 34745, US**

2. Principal Place of Business: [21] State, Apt. #, etc. [22] City & State [23] Zip [24] Country
2a. Mailing Address: [26] Suite, Apt. #, etc. [27] City & State [28] Zip [29] Country

3. Date Incorporated or Qualified: **10/26/1992**
3a. Date of Last Report: **03/15/1995**
4. FEI Number: **51-0323933**
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
**OVERSTREET-GARCIA, REBECCA
143 HIBISCUS LANE
KISSIMMEE FL 34743**

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 617.0502 and 617.1506, 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	
12. OFFICERS AND DIRECTORS			
TITLE	NAME	TITLE	NAME
PD	OVERSTREET-GARCIA, REBECCA D		
143 HIBISCUS LANE			
KISSIMMEE FL 34743			
VD	GARCIA, CESAR D		
143 HIBISCUS LANE			
KISSIMMEE FL 34743			
SD	MELENDEZ, ZAIDA		
143 HIBISCUS LANE			
KISSIMMEE FL			
13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS			
		Change	Addition
		Change	Addition
		Change	Addition
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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: *Rebecca Overstreet-Garcia - Rebecca Garcia-Cesar D* 1-22-96
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day, Month, Year Phone #

CR2E037 (12/95)