

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000007720

**Entity Name:** EL HOSPITAL DEL ALMA LUTHERAN CHURCH OF  
HOMESTEAD, FLORIDA INC.**Current Principal Place of Business:**29501 SW 152 AVE  
LEISURE CITY, FL 33033**Current Mailing Address:**29501 SW 152 AVE  
LEISURE CITY, FL 33033**FEI Number: 30-0233765****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**PEREZ-LOPEZ, BENITO REV.  
10301 SW 45 ST  
MIAMI, FL 33165 US*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

**Officer/Director Detail :**

Title	DV
Name	GOMEZ, HECTOR
Address	28501 S.W. 152 AVE. #60
City-State-Zip:	LEISURE CITY FL 33033

Title	S
Name	ORTEGA , DIOMAR
Address	15250 HARDING DR
City-State-Zip:	LEISURE CITY FL 33033

Title	DP
Name	PEREZ, JESSIE
Address	10301 SW 45 ST
City-State-Zip:	MIAMI FL 33165

Title	T
Name	ALMOGUEA, SANDRA
Address	28655 SW 153 AVE APT # 205
City-State-Zip:	HOMESTEAD FL 33033

I hereby 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 all other like empowered.

**SIGNATURE: JESSIE PEREZ****DP****01/05/2018**

Electronic Signature of Signing Officer/Director Detail

Date