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: BAREK JUAN J DR

Electronic Signature of Signing Officer/Director Detail

**Current Mailing Address:** 

P.O. BOX 521494 MIAMI, FL 33152 US

5529 NW N LUNDY CIRCLE PORT SAINT LUCIE, FL 34986

### FEI Number: 65-1122995

#### Name and Address of Current Registered Agent:

BAREK, JUAN J 5529 NW N LUNDY CIRCLE PORT SAINT LUCIE, FL 34986 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

#### **Officer/Director Detail :**

Title	P	Title	VP
Name	BAREK, JUAN J DR.	Name	SARAH, BAREK C DR.
Address	P.O. BOX 521494	Address	P.O. BOX 521494
City-State-Zip:	MIAMI FL 33152	City-State-Zip:	MIAMI FL 33152

Certificate of Status Desired: No

FILED Apr 29, 2024 Secretary of State 7979871435CC

Date

PRESIDENT

04/29/2024

Date

## 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0100003665

Entity Name: IGLESIA BAUTISTA, JESUCRISTO EL CAMINO, INC.

# **Current Principal Place of Business:**