

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000008001

**FILED**  
**Feb 27, 2015**  
**Secretary of State**  
**CC4347781445**

**Entity Name:** INTERNATIONAL MINISTRIES OF THE GLORIOUS CHURCH, INC.

**Current Principal Place of Business:**

345 N. HAVERHILL RD.  
APT M-30  
WEST PALM BEACH, FL 33415

**Current Mailing Address:**

345 N. HAVERHILL RD.  
APT M-30  
WEST PALM BEACH, FL 33415 US

**FEI Number: 50-0008331**

**Certificate of Status Desired: No**

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

ARIZ, MAIDA  
345 N. HAVERHILL RD.  
APT M-29  
WEST PALM BEACH, FL 33415 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 ASST. TREASURER  
Name ARIZ, MAIDA  
Address 345 N. HAVERHILL RD.  
APT M-29  
City-State-Zip: WEST PALM BEACH FL 33415

Title PRESIDENT  
Name ARIZ, REINA M  
Address 345 N. HAVERHILL RD.  
APT M-30  
City-State-Zip: WEST PALM BEACH FL 33415

Title TREASURER  
Name DEL CARPIO, ROSA  
Address 2660 HAVERHILL RD NORTH  
APT 245  
City-State-Zip: WEST PALM BEACH FL 33417

Title D  
Name VALERO, EVID  
Address 2067 TARRAGON RD.  
City-State-Zip: WEST PALM BEACH FL 33415

*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: REINA M ARIZ**

**PRESIDENT**

**02/27/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date