

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000012699

Entity Name: MINISTERIO MANASES, INC.**Current Principal Place of Business:**2150 SW 8 ST
MIAMI, FL 33135**Current Mailing Address:**2150 SW 8 ST
MIAMI, FL 33135 US**FEI Number:** 20-3930756**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**VALENZUELA, CARLOS H
2915 SW 24 TERR
MIAMI, FL 33145 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	DP
Name	VALENZUELA, CARLOS H
Address	2915 SW 24 TERR
City-State-Zip:	MIAMI FL 33145

Title	DV
Name	GONZALEZ, ALFREDO
Address	2049 SW 57TH COURT
City-State-Zip:	MIAMI FL 33155

Title	DS
Name	VALENZUELA, CLARA C
Address	2915 SW 24 TERR
City-State-Zip:	MIAMI FL 33145

Title	DT
Name	LOPEZ, LIANNETT
Address	2049 SW 57TH COURT
City-State-Zip:	MIAMI FL 33155

Title	DIRECTOR
Name	VEGA, PABLO
Address	9804 PORTOFINO DR.
City-State-Zip:	ORLANDO FL 32832

Title	DIRECTOR
Name	MICHELE, VALLADARES
Address	4354 LOCHURST DRIVE
City-State-Zip:	PFAFFTOWN NC 27040

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: LIANNETT LOPEZ

DT

03/01/2017

Electronic Signature of Signing Officer/Director Detail_____
Date