

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000006967

**Entity Name:** IGLESIA PENTECOSTES ANTORCHA ENCENDIDA INC.

**Current Principal Place of Business:**

3550 DAVIE BLVD.  
FORT LAUDERDALE, FL 33312

**Current Mailing Address:**

3900 SW 51ST STREET  
APT 3  
FORT LAUDERDALE, FL 33312 US

**FEI Number:** 27-3094801

**Certificate of Status Desired:** No

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

SOPON, OCXAEAL  
3900 SW 51ST STREET  
APT 3  
FORT LAUDERDALE, FL 33312 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 P  
Name SOPON, OCXAEAL SR.  
Address 3900 SW 51ST STREET  
APT 3  
City-State-Zip: FORT LAUDERDALE FL 33312

Title S  
Name TELLEZ, JAVIER SR.  
Address 4477 SW 66TH TERRACE  
City-State-Zip: DAVIE FL 33314

Title T  
Name MALDONADO, PEDRO SR.  
Address 6151 SW 37TH CT  
UNIT B  
City-State-Zip: DAVIE FL 33314

Title MANAGER  
Name SECAIDA , EVELIN  
Address 3900 SW 51ST STREET  
APT 3  
City-State-Zip: FORT LAUDERDALE FL 33312

Title VP  
Name ADAMS, MARLENE  
Address 7725 YARDLEY DRIVE  
308  
City-State-Zip: TAMARAC FL 33321

*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:** SOPON, OCXAEAL

**PRESIDENT**

**05/01/2023**

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

\_\_\_\_\_  
Date