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

DOCUMENT# N10000007457

Entity Name: CITA CON LA VIDA INC.

**Current Principal Place of Business:** 

100 PINE ISLAND CIR KISSIMMEE, FL 34743

**Current Mailing Address:** 

100 PINE ISLAND CIR KISSIMMEE. FL 34743 US

FEI Number: 27-3249522 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FERREYRA, SANTIAGO H 100 PINE ISLAND CIR KISSIMMEE, FL 34743 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

FILED Feb 09, 2023

**Secretary of State** 

1902151777CC

Officer/Director Detail:

Title PRESIDENT, PASTOR Title VP, PASTOR

NameFERREYRA, SANTIAGO HNameCORREA, VALERIA IAddress100 PINE ISLAND CIRAddress100 PINE ISLAND CIRCity-State-Zip:KISSIMMEE FL 34743City-State-Zip:KISSIMMEE FL 34743

Title CHAIRMAN, PASTOR Title O.

NameBELART, CARLOS ANameGLARIA, FERNANDO RAddress100 PINE ISLAND CIRAddress100 PINE ISLAND CIRCity-State-Zip:KISSIMMEE FL 34743City-State-Zip:KISSIMMEE FL 34743

Title O. Title CFO

NameAMADO, CARLOS UNameFERREYRA, JULIET BAddress100 PINE ISLAND CIRAddress100 PINE ISLAND CIRCity-State-Zip:KISSIMMEE FL 34743City-State-Zip:KISSIMMEE FL 34743

Title OFFICER

Name SANTIAGO, PABLO
Address 5414 KALMIA DR
City-State-Zip: ORLANDO FL 32807

above, or on an attachment with all other like empowered.

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

SIGNATURE: SANTIAGO FERREYRA PRESIDENT 02/09/2023