## 2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000008681

Entity Name: LIVING PRESENCE MINISTRIES, INC.

FILED
Jan 15, 2020
Secretary of State
3765686312CC

## **Current Principal Place of Business:**

7500 NW 25TH. STREET UNIT 11 MIAMI, FL 33122

## **Current Mailing Address:**

7500 NW 25TH. STREET UNIT 11 MIAMI, FL 33122 US

FEI Number: 45-2822889

Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

EDWIN, CASTRO 7500 NW 25TH. STREET UNIT 11 MIAMI, FL 33122 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: EDWIN CASTRO 01/15/2020

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PRESIDENT Title VC

Name CASTRO, EDWIN Name CASTRO, MARIBEL L

Address 10710 NW 66TH ST APT 307 Address 10710 NW 66TH ST APT 307

City-State-Zip: DORAL FL 33178 City-State-Zip: DORAL FL 33178

Title ELDER Title ELDER

Name SILVA, JOSE Name JUSTINIANO, ROLANDO

 Address
 928 SW 143 PL
 Address
 12187 SW 124 CT

 City-State-Zip:
 MIAMI FL 33184
 City-State-Zip:
 MIAMI FL 33186

Title SECRETARY Title TREASURER

Name CASTRO, GIOVANNY Name CRESPO, JOHN

Address 11067 NW 72ND TERR Address 10242 NW 75 TERRACE

City-State-Zip: DORAL FL 33178

City-State-Zip: DORAL FL 33178

City-State-Zip: DORAL FL 33178 City-State-Zip: DO

Title ELDER

Name PARDO, HECTOR J
Address 11067 NW 72 TR
City-State-Zip: DORAL FL 33178

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: EDWIN CASTRO PRESIDENT 01/15/2020