

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

DOCUMENT# N13000008642

**Entity Name:** CENTRO DE AVIVAMIENTO CRISTIANO MIAMI, INC.

**Current Principal Place of Business:**

10414 SW 184 TR  
MIAMI, FL 33157

**Current Mailing Address:**

1200 W 63 ST  
HIALEAH, FL 33012 US

**FEI Number:** 46-3798978

**Certificate of Status Desired:** No

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

VILA SANTOYO, ORSON REV.  
1200 W 63 ST  
HIALEAH, FL 33012 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 VILA SANTOYO, ORSON REV.  
Address 1200 W 63 ST  
City-State-Zip: HIALEAH FL 33012

Title VP  
Name MORALES DE VILA, NOEMI REV.  
Address 1200 W 63 ST  
City-State-Zip: HIALEAH FL 33012

*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:** ORSON VILA SANTOYO

P

03/31/2023

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

\_\_\_\_\_  
Date