

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13000008653

**Entity Name:** IGLESIA EPISCOPAL SANTISIMA TRINIDAD, INC.**Current Principal Place of Business:**6744 NORTH MIAMI AVE  
MIAMI, FL 33150**Current Mailing Address:**6744 NORTH MIAMI AVE  
MIAMI, FL 33150 US**FEI Number:** 46-4464156**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MILIEN, SMITH REV.  
6744 NORTH MIAMI AVE  
MIAMI, FL 33150 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:** MILIEN SMITH

02/18/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	P	Title	VP
Name	MILIEN, MARIVEL	Name	HERRERA, RAUL
Address	6744 NMIAMI AVENUE	Address	8135 W, 36 TH AVENUE APT.4
City-State-Zip:	MIAMI FL 33150	City-State-Zip:	HIALEAH FL 33018
Title	VP	Title	VP
Name	REYES, BIENVENIDA	Name	GONZALEZ, LUZ T
Address	2832 FILLMORE STREET APT.21	Address	596 NE, 108TH STREET
City-State-Zip:	HOLLYWOOD FL 33020	City-State-Zip:	MIAMI FL 33168
Title	VP	Title	REV.
Name	PEREZ, NELIA O	Name	MILIEN, MARIVEL
Address	600 NW, 6TH STREET, APT.705	Address	6744 NORTH MIAMI AVE
City-State-Zip:	MIAMI FL 33136	City-State-Zip:	MIAMI FL 33150
Title	REVEREND		
Name	MILIEN, MARIVEL SR.		
Address	6744 NORTH MIAMI AVE		
City-State-Zip:	MIAMI FL 33150		

*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:** MARIVEL MILIEN

PRIEST

02/18/2021

Electronic Signature of Signing Officer/Director Detail

Date