

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

DOCUMENT# N13000010261

**FILED**  
**Mar 31, 2023**  
**Secretary of State**  
**2908398259CC**

**Entity Name:** IGLESIA DE DIOS PENTECOSTAL MOVIMIENTO  
INTERNACIONAL INC 082

**Current Principal Place of Business:**

840 FORT SMITH BLVD  
DELTONA, FL 32738

**Current Mailing Address:**

12621 BALCOMBE RD  
ORLANDO, FL 32837 US

**FEI Number: 46-3992876**

**Certificate of Status Desired: Yes**

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

ORTIZ GUZMAN , ANTONIO  
12621 BALCOMBE RD  
ORLANDO, FL 32837 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:** ANTONIO ORTIZ GUZMAN

03/31/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PASTOR, PRESIDENT  
Name PIZARRO, JACOB  
Address 2521 SEDGEFIELD AVE  
City-State-Zip: DELTONA FL 32725

Title TREASURER  
Name VALENTIN, EDWIN  
Address 1240 13TH STREET  
City-State-Zip: ORANGE CITY FL 32763

Title EXECUTIVE DIRECTOR  
Name LOPEZ, JESUS M  
Address 12340 HAMMOCK HILL DR  
City-State-Zip: CLERMONT FL 34711

Title VOCAL I  
Name FIGUEROA, ANGEL L  
Address 1563 CARMONA CT  
City-State-Zip: DELTONA FL 32738

Title MISSIONARY  
Name RAMOS PIZARRO, RUTH S  
Address 2521 SEDGEFIELD AVE  
City-State-Zip: DELTONA FL 32725

Title VOCAL III  
Name GONZALEZ, ALBERTO  
Address 1202 GAGE AVE  
City-State-Zip: DELTONA FL 32738

Title SECRETARY  
Name GUERRERO, LUZ MARIBEL  
Address 670 GAINSBORO STREET  
City-State-Zip: DELTONA FL 32725

Title ASST. SECRETARY  
Name MALDONADO, EMARILYS  
Address 2301 E DANA DR  
City-State-Zip: DELTONA FL 32738

**Continues on page 2**

*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:** JESUS M LOPEZ

EXECUTIVE DIRECTOR

03/31/2023

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title ASST. TREASURER  
Name PEREZ, JULIO  
Address 1619 W AKRON DR  
City-State-Zip: DELTONA FL 32725

Title VOCAL II  
Name ARROYO, EDWIN  
Address 985 GREENLEAF GARDENS CT.  
APT 6  
City-State-Zip: ORANGE CITY FL 32763