

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13000010446

Entity Name: MINISTERIO EXTENDIENDO LA MANO, INC.**Current Principal Place of Business:**2300 NORTH DIXIE HIGHWAY
HOLLYWOOD, FL 33020**Current Mailing Address:**PO BOX 134
HALLANDALE BEACH, FL 33008**FEI Number:** 61-1706800**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**RAMOS, LUIS
2300 NORTH DIXIE HIGHWAY
HOLLYWOOD, FL 33020 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/D
Name	RAMOS, LUIS
Address	2300 NORTH DIXIE HIGHWAY
City-State-Zip:	HOLLYWOOD FL 33020

Title	VP
Name	IVONNE, RAMOS
Address	2300 NORTH DIXIE HIGHWAY
City-State-Zip:	HOLLYWOOD FL 33020

Title	SECRETARY
Name	LESLIE, NUÑEZ
Address	2300 NORTH DIXIE HIGHWAY
City-State-Zip:	HOLLYWOOD FL 33020

Title	TREASURER
Name	RAUL, BAEZ
Address	2300 NORTH DIXIE HIGHWAY
City-State-Zip:	HOLLYWOOD FL 33020

Title	D
Name	CARMEN, BAEZ
Address	2300 NORTH DIXIE HIGHWAY
City-State-Zip:	HOLLYWOOD FL 33020

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: LUIS RAMOS**PRESIDENTE****01/10/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date