

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N14000001731

**FILED**  
**Mar 09, 2020**  
**Secretary of State**  
**7042427161CC**

**Entity Name:** IGLESIA DE DIOS PENTECOSTAL MOVIMIENTO INTERNACIONAL INC 093

**Current Principal Place of Business:**

1131 NORTH GOLDENROD RD  
ORLANDO, FL 32807

**Current Mailing Address:**

12621 BALCOMBE RD.  
ORLANDO, FL 32837 US

**FEI Number: 46-3948002**

**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

03/09/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PASTOR  
Name PADILLA, EPHRAIN  
Address 607 DEE DEE STREET  
City-State-Zip: ORLANDO FL 32807

Title SECRETARY  
Name MORALES, JOANIE  
Address 7300 GATEHOUSE CIR APT 11  
City-State-Zip: ORLANDO FL 32807

Title TREASURER  
Name SANTIAGO, KAREN  
Address 1525 INDIAN SUMMER LN  
City-State-Zip: ORLANDO FL 32825

Title EXECUTIVE DIRECTOR  
Name RUIZ, JUAN E  
Address 12177 STONE BARK TRL  
City-State-Zip: ORLANDO FL 32824

Title VOCAL II  
Name SANCHEZ, MARITZA  
Address 10017 HIDDEN RIVER DR  
APT 309  
City-State-Zip: ORLANDO FL 32829

Title VOCAL III  
Name COTTO TORRES, RUDDY A  
Address 9055 FORT JEFFERSON BLVD  
City-State-Zip: ORLANDO FL 32822

Title ASST. TREASURER  
Name ALVARADO, CARMEN L  
Address 354 AUTUMN BREEZE WAY  
City-State-Zip: WINTER PARK FL 32792

Title VOCAL I  
Name NOGUERA MARTINEZ, VIRGILIO  
Address 8613 CLARIBORNE CT  
City-State-Zip: ORLANDO FL 32825

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*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:** JUAN E RUIZ

EXECUTIVE DIRECTOR

03/09/2020

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title ASST. SECRETARY  
Name CANDELARIO RUIZ, MAYRA L  
Address 1500 FREDICA DRIVE  
City-State-Zip: ORLANDO FL 32812

Title VOCAL V  
Name RIVERA FLORES, RAYMOND E  
Address 12330 PAPER BIRCH LN  
City-State-Zip: ORLANDO FL 32824

Title VOCAL IV  
Name POMALES TIRADO, CELINES  
Address 7413 MARBELLA PT DRIVE  
APT 306  
City-State-Zip: ORLANDO FL 32822