

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15000001364

Entity Name: MINISTERIO TRANSFORMANDO LAS NACIONES INC**Current Principal Place of Business:**5669 CENTURY 21 BLVD APT 431
ORLANDO, FL 32807**Current Mailing Address:**5669 CENTURY 21 BLVD APT 431
ORLANDO, FL 32807 US**FEI Number: 47-3079454****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**RAMOS, RICHARD
5669 CENTURY 21 BLVD APT 431
ORLANDO, FL 32807 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 | PRESIDENT |
| Name | RAMOS, RICHARD |
| Address | 5669 CENTURY 21 BLVD APT 431 |
| City-State-Zip: | ORLANDO FL 32807 |

| | |
|-----------------|---------------------|
| Title | DIRECTOR |
| Name | GONZALEZ, MYRA |
| Address | 1215 REGAL RIDGE DR |
| City-State-Zip: | ORLANDO FL 32825 |

| | |
|-----------------|------------------------|
| Title | OFFICER |
| Name | RAMOS, ANDREA |
| Address | 1400 ENCORE PLACE #149 |
| City-State-Zip: | LAKE MARY FL 32746 |

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: RICHARD RAMOS**OWNER****01/03/2022**_____
Electronic Signature of Signing Officer/Director Detail_____
Date