

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N15000004176

**Entity Name:** AJIGBOTIFA TEMPLE MIAMI-HOME OF TRADITIONAL SOLUTIONS INC.

**FILED  
Apr 22, 2019  
Secretary of State  
4084069475CC**

**Current Principal Place of Business:**

30301 SW 171 AVE  
HOMESTEAD, FL 33030

**Current Mailing Address:**

30301 SW 171 AVE  
HOMESTEAD, FL 33030 US

**FEI Number: 47-3934422**

**Certificate of Status Desired: No**

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

CHRISTIAN CARRAZANA, P.A.  
30301 SW 171 AVE  
HOMESTEAD, FL 33030 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 DP  
Name CARRAZANA, CHRISTIAN  
Address 30301 SW 171 AVE  
City-State-Zip: HOMESTEAD FL 33030

Title D, TREASURER  
Name CARRAZANA, JAQUETTA  
Address 30301 SW 171 AVE  
City-State-Zip: HOMESTEAD FL 33030

Title VP  
Name BROWN, ALKINI W  
Address 30301 SW 171 AVE  
City-State-Zip: HOMESTEAD FL 33030

Title SECRETARY  
Name BUSH, ALDEN A  
Address 30301 SW 171 AVE  
City-State-Zip: HOMESTEAD FL 33030

Title DIRECTOR  
Name CRUZ, TRACY M  
Address 30301 SW 171 AVE  
City-State-Zip: HOMESTEAD FL 33030

*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: JAQUETTA CARRAZANA**

**DT**

**04/22/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date