

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N15000009878

**Entity Name:** HEBREOS 13-3 INTERNATIONAL OUTREACH MINISTRY INC

**Current Principal Place of Business:**

207-2 N MAIN AVE  
LAKE PLACID, FL 33852

**Current Mailing Address:**

207-2 N MAIN AVE  
LAKE PLACID, FL 33852 US

**FEI Number:** 47-5530523

**Certificate of Status Desired:** No

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

ANA L SAINZ PA  
207-2 N MAIN AVE  
LAKE PLACID, FL 33852 US

**FILED**  
**Apr 03, 2024**  
**Secretary of State**  
**1005689420CC**

*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 PCEO  
Name SAINZ, CARLOS R & ANA L  
Address 721 SUNSET POINT DRIVE  
City-State-Zip: LAKE PLACID FL 33852

Title SEC, TREASURER  
Name ZAMBELLI, LILIANA  
Address 8971 SW 57 TERR  
City-State-Zip: MIAMI FL 33173

Title DIR  
Name CARRASQUILLO, ERNESTO & IDELDA  
Address 405 NW 14 STREET  
City-State-Zip: HOMESTEAD FL 33030

Title DIR  
Name RODRIGUEZ, HENRY  
Address 5845 SW 64 AVE  
City-State-Zip: MIAMI FL 33143

Title DIRECTOR  
Name ESCOBAR, EIIO & CAROLINA  
Address 15620 SW 80 STREET  
203  
City-State-Zip: MIAMI FL 33193

Title DIRECTOR  
Name GOSS, WARREN & LETICIA  
Address 13981 SW 122 AVE  
306  
City-State-Zip: MIAMI FL 33186

Title DIRECTOR  
Name MORALES, SONIA  
Address 988 NW 126 CT  
City-State-Zip: MIAMI FL 33182

Title DIRECTOR  
Name CARRERO, HORTENSIA  
Address 25432 SW 122 CT  
City-State-Zip: PRINCETON FL 33032

**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:** SAINZ, CARLOS R & ANA L

**PCEO**

**04/03/2024**

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

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name SOSA, LUIS MIGUEL  
Address 7640 SW 153 CT UNIT 104  
City-State-Zip: MIAMI FL 33193

Title DIRECTOR  
Name DE LA CRUZ, FRANCISCO  
Address 2490 SW 19 STREET  
City-State-Zip: MIAMI FL 33145-2408

Title DIRECTOR  
Name CENTENO JR, ANDRES ANTONIO  
Address 10712 SW 123 CT  
City-State-Zip: MIAMI FL 33186-3728