

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

DOCUMENT# N17000000488

**Entity Name:** COMUNIDAD CRISTIANA INTERNACIONAL DE TEOTERAPIA INTEGRAL, CORP.**FILED**  
**May 26, 2020**  
**Secretary of State**  
**5277293610CC****Current Principal Place of Business:**121 ALHAMBRA PLAZA  
SUITE 1500  
CORAL GABLES, FL 33134**Current Mailing Address:**121 ALHAMBRA PLAZA  
SUITE 1500  
CORAL GABLES, FL 33134 US**FEI Number: 81-5080324****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**PERERA, AUGUSTO  
121 ALHAMBRA PLAZA  
SUITE 1500  
CORAL GABLES, FL 33134 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:** AUGUSTO PERERA, ESQ.**05/26/2020**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	P
Name	MORA, MARCO ANTONIO
Address	121 ALHAMBRA PLAZA SUITE 1500
City-State-Zip:	CORAL GABLES FL 33134

Title	ST
Name	JAIMES, DELMA L
Address	121 ALHAMBRA PLAZA SUITE 1500
City-State-Zip:	CORAL GABLES FL 33134

Title	VP
Name	GENTINA, BRUNO
Address	121 ALHAMBRA PLAZA SUITE 1500
City-State-Zip:	CORAL GABLES FL 33134

Title	DIRECTOR
Name	GONZALEZ, EMILIA
Address	121 ALHAMBRA PLAZA SUITE 1500
City-State-Zip:	CORAL GABLES FL 33134

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:** JAIMES , DELMA L**ST****05/26/2020**

Electronic Signature of Signing Officer/Director Detail

Date