

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

DOCUMENT# N17000000488

**Entity Name:** COMUNIDAD CRISTIANA INTERNACIONAL DE TEOTERAPIA  
INTEGRAL, CORP.

**FILED**  
**Feb 27, 2024**  
**Secretary of State**  
**0865041215CC**

**Current Principal Place of Business:**

121 ALHAMBRA PLAZA  
SUITE 1500  
CORAL GABLES, FL 33134-4551

**Current Mailing Address:**

121 ALHAMBRA PLAZA  
SUITE 1500  
CORAL GABLES, FL 33134-4551 US

**FEI Number: 81-5080324**

**Certificate of Status Desired: Yes**

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

JAIMES, DELMA  
14981 SOUTH WEST 147 COURT  
MIAMI, FL 33196 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: DELMA JAIMES**

**02/27/2024**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name MORA, MARCO ANTONIO  
Address 14981 SOUTH WEST 147 COURT  
City-State-Zip: MIAMI FL 33196

Title ST  
Name JAIMES, DELMA L  
Address 14981 SOUTH WEST 147 COURT  
City-State-Zip: MIAMI FL 33196

Title VP  
Name SALINAS, JOSE N  
Address 14981 SOUTH WEST 147 COURT  
City-State-Zip: MIAMI FL 33196

*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**

**SECRETARY**

**02/27/2024**

Electronic Signature of Signing Officer/Director Detail

Date