

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17000001903

Entity Name: INSTITUTO BIBLICO JESUCRISTO PAN DE VIDA INC**Current Principal Place of Business:**2201 SW COLLEGE RD SUITE 13
OCALA, FL 34471**Current Mailing Address:**2201 SW COLLEGE RD SUITE 13
OCALA, FL 34471 US**FEI Number: 81-5411415****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**SOTO, PEDRO A SR.
13449 SW 112TH PLACE
DUNNELLON, FL 34432 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	P
Name	SOTO, MARIA M
Address	2201 SW COLLEGE RD SUITE 13
City-State-Zip:	OCALA FL 34471

Title	VP
Name	SOTO, PEDRO A. SR
Address	13449 SW 112TH PL
City-State-Zip:	DUNNELLON FL 34432

Title	OFFICER
Name	CAMACHO, PAULA
Address	2855 SW 166TH LANE
City-State-Zip:	OCALA FL 34473

Title	SECRETARY
Name	RODRIGUEZ, SHARIMA
Address	7125 S FINALE POINT
City-State-Zip:	HOMOSASSA FL 34446

Title	TREASURER
Name	ACEVEDO, FANNY
Address	944 GRAPEWOOD STREET
City-State-Zip:	DELTONA FL 32725

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: SOTO, MARIA M**P****01/31/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date