

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18000000110

Entity Name: FATIMA INTERNATIONAL PILGRIMAGE CENTER, INC.**Current Principal Place of Business:**8706 MAPLE LAKE PL
TAMPA, FL 33635**Current Mailing Address:**8706 MAPLE LAKE PL
TAMPA, FL 33635 US**FEI Number:** 82-3875322**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JUN REMO CFO, INC.
8706 MAPLE LAKE PL
TAMPA, FL 33635 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	REMO, ARMANDO
Address	8706 MAPLE LAKE PLACE
City-State-Zip:	TAMPA FL 33635

Title	D
Name	REMO, ELIZABETH FRAN J
Address	8706 MAPLE LAKE PL
City-State-Zip:	TAMPA FL 33635

Title	DIRECTOR
Name	REMO, JOHN PAUL JOVEN
Address	8706 MAPLE LAKE PL
City-State-Zip:	TAMPA FL 33635

Title	D
Name	REMO, ELIZABETH ELSI J
Address	8706 MAPLE LAKE PLACE
City-State-Zip:	TAMPA FL 33635

Title	DIRECTOR
Name	REMO, ANNE CATHERINE JOVEN
Address	8706 MAPLE LAKE PLACE
City-State-Zip:	TAMPA FL 33635

Title	DIRECTOR
Name	REMO, JOSEPH MICHAEL JOVEN
Address	8706 MAPLE LAKE PL
City-State-Zip:	TAMPA FL 33635

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: ARMANDO G REMO JR**PRESIDENT****04/28/2023**_____
Electronic Signature of Signing Officer/Director Detail_____
Date