

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N20000012042

**Entity Name:** BURNING FLAMES MINISTRIES OF ORLANDO, INC.

**Current Principal Place of Business:**

7950 NW 53RD STREET  
SUITE 245  
DORAL, FL 33166

**Current Mailing Address:**

4417 13 STREET  
#425  
SAINT CLOUD, FL 34769 US

**FEI Number:** 85-3665419

**Certificate of Status Desired:** No

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

IVY HERNANDEZ  
4417 13 STREET  
#425  
SAINT CLOUD, FL 34769 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 IVY HERNANDEZ  
Address 4417 13 STREET  
#425  
City-State-Zip: SAINT CLOUD FL 34769

Title VP  
Name ROXANA MORRIS  
Address 4417 13 STREET  
#425  
City-State-Zip: SAINT CLOUD FL 34769

Title D  
Name ALFONSO CORDERO  
Address 4417 13 STREET  
#425  
City-State-Zip: SAINT CLOUD FL 34769

Title D  
Name ESTHER CORDERO  
Address 4417 13 STREET  
#425  
City-State-Zip: SAINT CLOUD FL 34769

*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:** ALFONSO CORDERO

D

01/26/2022

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

\_\_\_\_\_  
Date