

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

DOCUMENT# N97000000944

**Entity Name:** CENTRO CULTURAL ROSACRUZ AMORC-HIALEAH, INC.

**Current Principal Place of Business:**

1671 WEST 37 STREET  
SUITE # 8  
HIALEAH, FL 33012

**Current Mailing Address:**

1671 WEST 37 STREET  
SUITE # 8  
HIALEAH, FL 33012 US

**FEI Number:** 65-0745575

**Certificate of Status Desired:** No

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

CRUZ, BEATRIZ D  
1671 WEST 37 STREET  
SUITE #8  
HIALEAH, FL 33012 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:** BEATRIZ D CRUZ

04/13/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            MORA, VICTOR  
Address        18932 NW 45 AVENUE  
City-State-Zip: MIAMI GARDENS FL 33055

Title            SECRETARY  
Name            REYES, LIDIA  
Address        3648 NW 99 STREET  
City-State-Zip: MIAMI FL 33147

Title            TREASURER  
Name            FERNANDEZ, MARGARITA  
Address        6259 WEST 24 AVENUE  
                  # 106  
City-State-Zip: HIALEAH FL 33016

Title            DIRECTOR  
Name            CRUZ, BEATRIZ D  
Address        1057 NE 210 TERRACE  
City-State-Zip: MIAMI FL 33179

*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:** BEATRIZ D CRUZ

**DIRECTOR**

04/13/2020

Electronic Signature of Signing Officer/Director Detail

Date