

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002864

Entity Name: INTERNATIONAL MINISTRY CHRIST HIS POWER IN ACTION,
CORP**FILED**
Apr 06, 2022
Secretary of State
1087785449CC**Current Principal Place of Business:**4720 SE 15TH AVENUE
UNIT 219
CAPE CORAL, FL 33904**Current Mailing Address:**808 CAPE CORAL PARKWAY WEST
APT 201
CAPE CORAL, FL 33914 US**FEI Number: 65-0877178****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**MIRANDA, MARISOL
808 CAPE CORAL PARKWAY WEST
APT 201
CAPE CORAL, FL 33914 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: MARISOL MIRANDA****04/06/2022**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :**Title** PRESIDENT/ SENIOR PASTOR, CEO
CHAIRMAN**Name** MIRANDA, LUCIANO SR.**Address** 808 CAPE CORAL PARKWAY WEST
APT 201**City-State-Zip:** CAPE CORAL FL 33914**Title** VP, CEO, COO**Name** MIRANDA, MARISOL**Address** 808 CAPE CORAL PARKWAY WEST
APT 201**City-State-Zip:** CAPE CORAL FL 33914**Title** D, CFO, OFFICER**Name** ESTENOZ, LYDIA**Address** 2508 FLAGLER AVE**City-State-Zip:** KEY WEST FL 33040**Title** ASST. SECRETARY/PASTOR,**Name** SANTORO, KIRA**Address** 1406 ARGYLE DR**City-State-Zip:** FT MYERS FL 33919**Title** SENIOR, VP, PASTOR**Name** HERNANDEZ, ARIEL L**Address** 230 SE 20TH CT**City-State-Zip:** CAPE CORAL FL 33990**Title** D, TREASURER**Name** MIRANDA, CARIDAD**Address** 230 SE 20TH CT**City-State-Zip:** CAPE CORAL FL 33990**Title** D/PASTOR, OFFICER**Name** SANTORO, JASON**Address** 1406 ARGYLE DR**City-State-Zip:** FT MYERS FL 33919**Title** D, OFFICER**Name** BERGERON, EDMUNDO**Address** 6410 MADALLION DR.**City-State-Zip:** FREDERICKSBURG VA 22407**Continues on page 2**

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: LUCIANO MIRANDA**CEO/PRESIDENT****04/06/2022**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title D, OFFICER
Name WOODWARD BERGERO, SHERRI
Address 6410 MEDALLION DR
City-State-Zip: FREDERICKSBURG VA 22407

Title DIRECTOR, OFFICER
Name ARTEAGA, HERNANDO
Address 302-90 HUXLEY ST
City-State-Zip: LONDON ONTARIO N6 J 2X8

Title D, SECRETARY
Name HERNANDEZ, REYCA
Address 230 SE 20TH CT
City-State-Zip: CAPE CORAL FL 33990

Title D, OFFICER
Name HERNANDEZ, GABRIELLE
Address 230 SE 20TH CT
City-State-Zip: CAPE CORAL FL 33990