

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N98000003735

**Entity Name:** IGLESIA DEL EVANGELIO PLENO DE MIAMI, INC.**Current Principal Place of Business:**2520 CORAL WAY - STE. 2-167  
MIAMI, FL 33145**Current Mailing Address:**2520 CORAL WAY - STE. 2-167  
MIAMI, FL 33145 US**FEI Number:** 65-0851584**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DE SA, REV. ALVARO  
2520 CORAL WAY - STE. 2-167  
MIAMI, FL 33145 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           | VP                   |
| Name            | ORTIZ-MERA, OLGA     |
| Address         | 2335 ARCH CR. DRIVE  |
| City-State-Zip: | NORTH MIAMI FL 33181 |

|                 |                         |
|-----------------|-------------------------|
| Title           | T                       |
| Name            | CASTANEDAS, REV. FERMIN |
| Address         | 840 82ND ST. #3         |
| City-State-Zip: | MIAMI BEACH FL 33141    |

|                 |                      |
|-----------------|----------------------|
| Title           | D                    |
| Name            | SANTIAGO, PAULO      |
| Address         | 840 82ND ST #3       |
| City-State-Zip: | MIAMI BEACH FL 33141 |

|                 |                    |
|-----------------|--------------------|
| Title           | P                  |
| Name            | DE SA, REV. ALVARO |
| Address         | 217 NW 34 AVENUE   |
| City-State-Zip: | MIAMI FL 33125     |

|                 |                |
|-----------------|----------------|
| Title           | S              |
| Name            | LINS, ENY C    |
| Address         | 217 NW 34 AVE  |
| City-State-Zip: | MIAMI FL 33125 |

|                 |                      |
|-----------------|----------------------|
| Title           | D                    |
| Name            | DE OLIVEIRA, VAUTER  |
| Address         | 840 82ND STE #3      |
| City-State-Zip: | MIAMI BEACH FL 33141 |

*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:** OLGA ORTIZ-MERA

VP

04/29/2017

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