The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Flo			
SIGNATURE	GARY G. HARRIS		
	Electronic Signature of Registered Agent		
Officer/Director Detail :			
Title	TREASURER	Title	PRESIDENT
Name	RODRIGUEZ, IVONNE AMARIS	Name	DUQUE, NOEL
Address	3511 SW 7TH ST.	Address	4760 SW 6 ST.
City-State-Zip:	MIAMI FL 33135	City-State-Zip:	MIAMI FL 33134
<b>T</b> '0.		Title	OFFICER. SECRETARY
Title	VP	nue	OFFICER, SECRETART
Name	PEREZ, JEREMIAH	Name	LIRA, NESTOR JULIO

Address

8111 SW 205 ST.

City-State-Zip: CUTLER BAY FL 33189

PRESIDENT

## **Current Mailing Address:**

**DOCUMENT# 269676** 

222 MENORES AVENUE CORAL GABLES, FL 33134

222 MENORES AVENUE CORAL GABLES. FL 33134 UN

Entity Name: CHURCH HOUSING CORP.

**Current Principal Place of Business:** 

## FEI Number: 59-1003257

## Name and Address of Current Registered Agent:

11938 SW 38 TERRACE

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

HARRIS, GARY GEORGE 215 MENDOZA AVE. CORAL GABLES, FL 33134 US

City-State-Zip: MIAMI FL 33175

Address

The above lorida.

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered. 01/09/2024

SIGNATURE: NOEL DUQUE

Date

## FILED Jan 09, 2024 Secretary of State 2165812945CC

Certificate of Status Desired: No

01/09/2024 Date

Electronic Signature of Signing Officer/Director Detail