

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

DOCUMENT# F95000003073

**FILED**  
**Feb 05, 2020**  
**Secretary of State**  
**0633803458CC**

**Entity Name:** UNIVERSAL CHRISTIAN GNOSTIC MOVEMENT OF THE U.S.A.  
(NEW ORDER), INC.

**Current Principal Place of Business:**

333 SOUTHERN BLVD  
SUITE 303  
WEST PALM BEACH, FL 33405

**Current Mailing Address:**

PO BOX 15303  
3200 SUMMIT BLVD.  
WEST PALM BEACH, FL 33416 US

**FEI Number: 52-1354130**

**Certificate of Status Desired: No**

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

ARBELAEZ, ZORAIDA  
333 SOUTHERN BLVD  
SUITE 303  
WEST PALM BEACH, FL 33405 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           PRESIDENT  
Name           ALFARO, TANIA  
Address        9525 GEORGIA AVE.  
                  STE. 102  
City-State-Zip: SILVER SPRING MD 20910

Title           SECRETARY  
Name           TALENTO, MARTA  
Address        9525 GEORGIA AVE.  
                  STE. 102  
City-State-Zip: SILVER SPRING MD 20910

Title           TREASURER  
Name           AMAYA, AIDA  
Address        9525 GEORGIA AVE.  
                  STE. 102  
City-State-Zip: SILVER SPRING MD 20910

Title           VP  
Name           JONES, MARIA CRISTINA  
Address        9525 GEORGIA AVE.  
                  STE. 102  
City-State-Zip: SILVER SPRING MD 20910

Title           CHAIRMAN  
Name           TORRES, DORANELLY  
Address        9525 GEORGIA AVE.  
                  STE. 102  
City-State-Zip: SILVER SPRING MD 20910

*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: TANIA ALFARO**

**PRESIDENT**

**02/05/2020**

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

\_\_\_\_\_  
Date