2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 716836

Entity Name: IGLESIA BAUTISTA GETSEMANI, INC.

Current Principal Place of Business:

5298 N.W 7TH ST. MIAMI. FL 33126

Current Mailing Address:

5298 N.W 7TH ST. MIAMI, FL 33126 US

FEI Number: 59-2226611 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WRIGHT, ARACELY 2950 SW 3 AVE APT 2F MIAMI, FL 33129 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

FILED Jan 23, 2023

Secretary of State

1407661729CC

Officer/Director Detail:

Title **PRESIDENT** Title **TREASURER** MEDINA, JOSE ALBERTO WRIGHT, ARACELY Name Name

12438 SW 220 ST 2950 SW 3 AVE APT 2F Address Address

City-State-Zip: MIAMI FL 33129 MIAMI FL 33170 City-State-Zip:

Title DIRECTOR Title DIRECTOR

Name GARAY, WILLIAM Name LEYVA, HIRAM Address 1135 SW 35 AVE Address 6537 WEST FLAGLER ST APT 5 MIAMI FL 33135 City-State-Zip: MIAMI FL 33144 City-State-Zip:

Title DIRECTOR Title **DIRECTOR**

Name ZEPEDA, JAIME O ESTEVA, RICARDO PELAYO Name Address 3430 NW 20 ST 9520 SW 8 ST APT 212 Address City-State-Zip: MIAMI FL 33142 City-State-Zip: MIAMI FL 33174

Title DIRECTOR Title DIRECTOR

COUCE, ARMANDO Name VELOZ, ALAIN Name 600 NW 32 PL APT 102 Address 51 SW 56 AVE Address

City-State-Zip: MIAMI FL 33125 CORAL GABLES FL 33134 City-State-Zip:

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.

01/23/2023 SIGNATURE: ARACELY WRIGHT TITLE TREASURER

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

NameBRINING, GASTONNameWRIGHT, ARACELYAddress9000 SW 19 STAddress2950 SW 3 AVE APT 2F

City-State-Zip: MIAMI FL 33165 City-State-Zip: MIAMI FL 33129