## 2019 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 1790 SW 16 ST 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

Date

FILED Jan 11, 2019

**Secretary of State** 

9219064245CC

Officer/Director Detail:

Title PRESIDENT Title VP

Name PESCADOR, JORGE Name PARADELA, RAMON

Address 555 NW 72 AVE APT 309 Address 6825 WEST FLAGLER APT 310

City-State-Zip: MIAMI FL 33126 City-State-Zip: MIAMI FL 33144

Title DIRECTOR Title **TREASURER** Name YABER, MOISES WRIGHT, ARACELY Name Address 11710 SW 143 CT Address 1790 SW 16TH STREET MIAMI FL 33186 City-State-Zip: City-State-Zip: MIAMI FL 33145

Title DIRECTOR Title SECRETARY

NameGONZALEZ, DINORAHNameOROPESA, GRISELAddress5830 SW 13 TRAddress9520 SW 8 ST APT 212

City-State-Zip: MIAMI FL 33144 City-State-Zip: MIAMI FL 33174

Title DIRECTOR Title DIRECTOR

Name BRINING, GASTON Name FERNANDEZ, EURIDICE

 Address
 9000 SW 19 ST
 Address
 3930 NW 2 TR

 City-State-Zip:
 MIAMI FL 33165
 City-State-Zip:
 MIAMI FL 33126

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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: ARACELY WRIGHT TREASURER 01/11/2019

Electronic Signature of Signing Officer/Director Detail

## Officer/Director Detail Continued:

Title DIRECTOR

Name MEDINA, JOSE A

Address 12438 SW 220TH STREET

City-State-Zip: MIAMI FL 33170