## **2013 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

FEI Number: 59-2226611 Certificate of Status Desired: Yes

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

FILED Feb 01, 2013

**Secretary of State** 

CC2022416105

Officer/Director Detail:

Title S Title O

NameARIAS, CONSUELONameALVAREZ, MANUELAddress53 NW 109TH CTAddress13950 SW 16 TERRACE

City-State-Zip: MIAMI FL 33172 City-State-Zip: MIAMI FL 33175

Title O Title OFFICER

Name ALFONSO, ODELFA Name RODRÍGUEZ, FELIPE PASTOR

Address 101 SW 62 COURT Address 4310 SW 2ND ST City-State-Zip: MIAMI FL 33144 City-State-Zip: MIAMI FL 33134

Title OFFICER Title OFFICER

Name FERNÁNDEZ, GUILLERMO SR. Name BRINING, GASTÓN SR.

 Address
 3930 NW 2 TERRACE
 Address
 5174 SW 5 ST.

 City-State-Zip:
 MIAMI FL 33126
 City-State-Zip:
 MIAMI FL 33134

Title OFFICER Title OFFICER

 Name
 LOSADA, CAMILO
 Name
 URIARTE, JUAN

 Address
 900 NW 39 AVE
 Address
 3090 NW 2 ST

 City-State-Zip:
 MIAMI FL 33126
 City-State-Zip: MIAMI FL 33125

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: CONSUELO ARIAS SECRETARY 02/01/2013