

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 755422

**Entity Name:** IGLESIA METODISTA UNIDA-CORAL WAY-UNITED METHODIST CHURCH, INC.

**FILED**  
**Mar 14, 2018**  
**Secretary of State**  
**CC5493203190**

**Current Principal Place of Business:**

7900 CORAL WAY  
MIAMI, FL 33155

**Current Mailing Address:**

7900 CORAL WAY  
MIAMI, FL 33155

**FEI Number: 65-0539490**

**Certificate of Status Desired: No**

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

ALVAREZ, ALICIA A  
7900 CORAL WAY  
MIAMI, FL 33155 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: ALICIA M ALVAREZ

03/14/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name ALVAREZ, YOVI  
Address 4014 NW 5 ST. MIAMI FL. 33126  
City-State-Zip: MIAMI FL 33126

Title TREASURER  
Name VINALET, JOSEFA  
Address 7820 SW 33 TERRACE  
City-State-Zip: MIAMI FL 33155

Title VP  
Name SIFUENTES, ISABEL DR.  
Address 5122 N.W. 114TH CT.  
City-State-Zip: DORAL FL 33178

Title D, ADMINISTRATOR  
Name ALVAREZ, ALICIA  
Address 7151 SW 7ST.  
City-State-Zip: MIAMI FL 33144

Title D  
Name NUNEZ, JOSE I DR.  
Address 7983 S.W. 160 AVENUE  
City-State-Zip: MIAMI FL 33193

Title D, SECRETARY  
Name HERNANDEZ, MAYRA  
Address 17350 NW 69 COURT  
City-State-Zip: MIAMI FL 33015

*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: ALICIA M. ALVAREZ

ADMINISTRATOR

03/14/2018

Electronic Signature of Signing Officer/Director Detail

Date