

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006591

Entity Name: LAS PISADAS DEL MAESTRO ASAMBLEAS DE DIOS, INC.**Current Principal Place of Business:**3400 74TH AVE N.
PINELLAS PARK, FL 33781**Current Mailing Address:**3400 74TH AVE NORTH
PINELLAS PARK, FL 33781 US**FEI Number: 59-3744142****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**RAMOS, VICTOR M
7081 43RD ST N
PINELLAS PARK, FL 33781 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	P
Name	RAMOS, VICTOR M
Address	7081 43RD ST N.
City-State-Zip:	PINELLAS PARK FL 33781

Title	T
Name	RUIZ, LUIS H
Address	5155 58TH AVE NORTH
City-State-Zip:	KENNETH CITY FL 33709

Title	VP
Name	RAMOS, GETZY LIZ
Address	7081 43RD STREET NORTH
City-State-Zip:	PINELLAS PARK FL 33781

Title	TRUSTEE
Name	RAMOS, JOSE M
Address	4400 37TH AVE NORTH
City-State-Zip:	SAINT PETERSBURG FL 33713

Title	SECRETARY
Name	RAMOS, JULIO A
Address	2051 41ST STREET NORTH
City-State-Zip:	SAINT PETERSBURG FL 33713

Title	TRUSTEE
Name	SANTIAGO, ANGEL LUIS
Address	5680 35TH STREET NORTH
City-State-Zip:	SAINT PETERSBURG FL 33714

Title	ASST. TREASURER
Name	ASHLEY, SPRING
Address	7496 1ST STREET NORTH
City-State-Zip:	SAINT PETERSBURG FL 33702

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: VICTOR M. RAMOS**PRESIDENT****02/20/2024**_____
Electronic Signature of Signing Officer/Director Detail_____
Date