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: ADOLFO SUAREZ

I

Electronic Signature of Signing Officer/Director Detail

### DOCUMENT# N0400007363

Entity Name: IGLESIA DORAL JESUS WORSHIP CENTER, INC.

## **Current Principal Place of Business:**

1900 NW 89TH PLACE DORAL, FL 33172

## **Current Mailing Address:**

1900 NW 89TH PLACE DORAL, FL 33172 US

## FEI Number: 84-1655763

# Name and Address of Current Registered Agent:

SUAREZ, ADOLFO 1900 NW 89TH PLACE DORAL, FL 33172 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	: ADOLFO SUAREZ			01/26/2021		
	Electronic Signature of Registered Agent			Date		
Officer/Director Detail :						
Title	PRESIDENT	Title	SECRETARY			
Name	LOPEZ, FRANK	Name	LOPEZ, ZAYDA			
Address	9000 N. W. 15 ST.	Address	9000 N. W. 15 ST.			
City-State-Zip:	DORAL FL 33172	City-State-Zip:	DORAL FL 33172			
Title Name Address City-State-Zip:	TREASURER MONTES DE OCA, HORACIO 9000 NW 15 ST. DORAL FL 33172	Title Name Address City-State-Zip:	EXECUTIVE DIRECTOR SUAREZ, ADOLFO 9000 N. W. 15 ST. DORAL FL 33172			
Title Name Address City-State-Zip:	DIRECTOR LOPEZ-LEVI, RAIMUNDO 9000 N. W. 15 ST. DORAL FL 33172					

01/26/2021 EXECUTIVE DIRECTOR

FILED Jan 26, 2021 Secretary of State 9442855302CC

Certificate of Status Desired: No

Date