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.

Ρ

SIGNATURE: JOSE TABRAUE

Electronic Signature of Signing Officer/Director Detail

DAVIE, FL 33330 US					
	The above named	ered agent, or both, in			
	SIGNATURE	JOSE TABRAUE			
		Electronic Signature of Registered Agent			
Officer/Director Detail :					
	Title	Ρ	Title	VP	
	Name	TABRAUE, JOSE	Name	GIL, ENRRIQUE	
	Address	12714 SOUTH WINNERS CIRCLE	Address	20151 NW 67 AVE	
	City-State-Zip:	DAVIE FL 33330	City-State-Zip:	HIALEAH FL 330	

ASST. TREASURER

RODRIGUEZ, JUAN

HIALEAH FL 33015

PERALTA. MISIEL 7872 NW 197 STREET

City-State-Zip: HIALEAH FL 33015

19141 NW 78 AVENUE

DAYCARE DIRECTOR

h, in the State of Florida.

Current Mailing Address:

Name and Address of Current Registered Agent:

TABRAUE, JOSE

Title

Name

Title

I

Name

Address

Address

City-State-Zip:

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT# N04137

Entity Name: MINISTERIO CASA DE ORACION INC.

Current Principal Place of Business:

20151 NW 67TH AVE HIALEAH, FL 33015

20151 NW 67 AVENUE HIALEAH. FL 33015 US

FEI Number: 59-2320561

12714 SOUTH WINNERS CIRCI F

Certificate of Status Desired: No

AVENUE 33015 ιy Title TREASURER Name HERNANDEZ, CAROLINA Address 4976 SW 127 WAY City-State-Zip: MIRAMAR FL 33027

01/25/2024

Date

FILED Jan 25, 2024 Secretary of State 9201726120CC

01/25/2024 Date