

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000001151

**Entity Name:** IGLESIA COSECHA DE CRISTO, INC.

**Current Principal Place of Business:**

619 SW 12 AVENUE  
MIAMI, FL 33130

**Current Mailing Address:**

619 SW 12TH AVE  
MIAMI, FL 33130 US

**FEI Number: 20-8427034**

**Certificate of Status Desired: Yes**

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

LOPEZ, ALICIA  
619 SW 12TH AVE  
MIAMI, FL 33130 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 PD  
Name LOPEZ, RODOLFO  
Address 619 SW 12 AVE  
City-State-Zip: MIAMI FL 33130

Title VPD  
Name LOPEZ, ALICIA  
Address 619 SW 12TH AVE  
City-State-Zip: MIAMI FL 33130

Title SD  
Name BARRIEL, EVELYN  
Address 104 SW 9 ST APT 602  
City-State-Zip: MIAMI FL 33130

Title CH  
Name FONSECA, MIRIAN  
Address 1530 NW 15 AVE  
City-State-Zip: MIAMI FL 33125

Title TD  
Name CRUZ, ALBA ROSARIO  
Address 610 SW 11 TH AVE APT 5  
City-State-Zip: MIAMI FL 33130

*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: EVELYN BARRIEL**

**SECRETARY**

**07/14/2015**

Electronic Signature of Signing Officer/Director Detail

Date