2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000003275

Entity Name: MINISTERIO INTERNACIONAL APOSTOLICO LOS HIJOS DE LA

FE, INC.

Current Principal Place of Business:

90 E. 10TH AVE. HIALEAH, FL 33010

Current Mailing Address:

90 E. 10TH AVE. HIALEAH, FL 33010

FEI Number: 26-2330766 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DE LA CRUZ, JUAN P 90 E. 10TH AVE. HIALEAH, FL 33010 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

FILED Jun 19, 2020

Secretary of State

8922482438CC

Officer/Director Detail:

Title PD, PRESIDENT Title VΡ

Name DE LA CRUZ, JUAN P SR. Name CUEVAS, BASILIA Address 90 E. 10TH AVE. Address 90 E. 10TH AVE. City-State-Zip: HIALEAH FL 33010 City-State-Zip: HIALEAH FL 33010

SD, EXECUTIVE SECRETARY Title **CFO** Title

Name DE LA CRUZ, AMMY Name GIOVIAMEDINA, ONEIDA

Address 90 E. 10TH AVE. Address 90 E. 10TH AVE. City-State-Zip: HIALEAH FL 33010 City-State-Zip: HIALEAH FL 33010

Title **PASTOR** Title TREASURER

Name LEZAMA, FRANCISCO DE LA CRUZ, JOHANNY Name

Address 90 E. 10TH AVE. 90 E. 10TH AVE. Address City-State-Zip: HIALEAH FL 33010 City-State-Zip: HIALEAH FL 33010

OFFICER Title Title **DEACONESS**

Name MARTINEZ, ESTHEL Name ROCHA, CARMEN ROSA Address 90 E. 10TH AVE. Address 90 E. 10TH AVE. City-State-Zip: HIALEAH FL 33010 HIALEAH FL 33010 City-State-Zip:

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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: JUAN P DE LA CRUZ

PRESIDENT

06/19/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title TREASURER, ASST. TREASURER Title DEACONESS

Name PARET, JOSEFINA Name TORRES, YAIDELINE

Address 90 E. 10TH AVE. Address 90 E. 10TH AVE.

City-State-Zip: HIALEAH FL 33010 City-State-Zip: HIALEAH FL 33010