

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000003719

**Entity Name:** MISION PAZ A LAS NACIONES, INC

**Current Principal Place of Business:**

16969 NW 67TH AVE  
SUITE 208  
HIALEAH, FL 33015

**Current Mailing Address:**

16969 NW 67TH AVE  
SUITE 208  
HIALEAH, FL 33015 US

**FEI Number:** 26-4681206

**Certificate of Status Desired:** No

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

M&L ACCOUNTING SERVICES  
16969 NW 67TH AVENUE  
SUITE 208  
HIALEAH, FL 33015 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:** GLORIA CONTRERAS

04/10/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            MANDERFIELD, JOEL  
Address        16969 NW 67TH AVENUE  
                  SUITE 208  
City-State-Zip: HIALEAH FL 33015

Title            VP  
Name            RUIZ, NORMA S  
Address        16969 NW 67TH AVE  
                  SUITE 208  
City-State-Zip: HIALEAH FL 33015

Title            D  
Name            RODRIGUEZ, GISELLE  
Address        16969 NW 67TH AVE  
                  SUITE 208  
City-State-Zip: HIALEAH FL 33015

Title            D  
Name            RODRIGUEZ, DIANA  
Address        16969 NW 67TH AVE  
                  SUITE 208  
City-State-Zip: HIALEAH FL 33015

Title            D  
Name            ARISTIZABAL, GERARDO  
Address        16969 NW 67TH AVE  
                  SUITE 208  
City-State-Zip: HIALEAH FL 33015

Title            D  
Name            RODRIGUEZ , JHON E  
Address        16969 NW 67TH AVE  
                  SUITE 208  
City-State-Zip: HIALEAH FL 33015

*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:** MANDERFIELD , JOEL

PRESIDENT

04/10/2023

Electronic Signature of Signing Officer/Director Detail

Date