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. 04/10/2024 PRESIDENT

SIGNATURE: CARLOS A SANCHEZ

Electronic Signature of Signing Officer/Director Detail

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

Officer/Director Detail:

City-State-Zip: HOMESTEAD FL 33030

Title	Р	Title	VP,T
Name	SANCHEZ, CARLOS A	Name	SANCHEZ, CILY
Address	14752 SW 297 TE	Address	14752 SW 297 TE
City-State-Zip:	HOMESTEAD FL 33033	City-State-Zip:	HOMESTEAD FL 33033
Title	т		
Name	SÁNCHEZ , GÉNESIS SARAI TREASURER		
Address	14752 SW 297 TERR		

2024 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N0900003813

Entity Name: CENTRO AVIVAMIENTO PODER DE DIOS INC

Current Principal Place of Business:

14752 SW 297 TERR HOMESTEAD, FL 33030

Current Mailing Address:

14752 SW 297 TERR HOMESTEAD, FL 33030 US

FEI Number: 26-4699669

Name and Address of Current Registered Agent:

SANCHEZ, CARLOS A 14752 SW 297 TE HOMESTEAD, FL 33033 US

FILED Apr 10, 2024 Secretary of State 8361961122CC

Certificate of Status Desired: No

Date

Date