

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N11566

**Entity Name:** IGLESIA CHRISTIANA OASIS DE RESTAURACION, INC.

**Current Principal Place of Business:**

721 MEMORIAL DR  
SEBRING, FL 33870

**Current Mailing Address:**

721 MEMORIAL DR  
SEBRING, FL 33870

**FEI Number:** 59-2590660

**Certificate of Status Desired:** No

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

ROBLES, JUAN A PASTOR  
721 MEMORIAL DR  
SEBRING, FL 33870 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:** JUAN A. ROBLES

02/14/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PASTOR  
Name ROBLES, JUAN A  
Address 721 MEMORIAL DR  
City-State-Zip: SEBRING FL 33870

Title SECRETARY  
Name CANALES, MARIA MRS  
Address 3830 RAMIRO ST  
City-State-Zip: SEBRING FL 33872

Title ELDER  
Name RIVERA, LISANDRA  
Address 2220 DELAINE ST  
City-State-Zip: AVON PARK FL 33825

Title TREASURE  
Name CALISTO, LISA TREASURER  
Address 721 MEMORIAL DR  
City-State-Zip: SEBRING FL 33870

Title TREASURE  
Name CALIXTO, LIZA TREASURE  
Address 721 MEMORIAL DR  
City-State-Zip: SEBRING FL 33870

*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 ROBLES

SENIOR PASTOR

02/14/2024

Electronic Signature of Signing Officer/Director Detail

Date