

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000011840

Entity Name: COME OVER MINISTRY, INC.**Current Principal Place of Business:**2640 WASHINGTON STREET
HOLLYWOOD, FL 33020**Current Mailing Address:**2640 WASHINGTON STREET
HOLLYWOOD, FL 33020 US**FEI Number:** 46-1751016**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**VARGAS, MARTIN
2640 WASHINGTON STREET
HOLLYWOOD, FL 33020 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	PED
Name	VARGAS, MARTIN
Address	3751 SHERIDAN ST
City-State-Zip:	HOLLYWOOD FL 33021

Title	SD
Name	BELTRAN, ALBERT
Address	3751 SHERIDAN ST
City-State-Zip:	HOLLYWOOD FL 33021

Title	D
Name	SALAZAR, JOSE
Address	3751 SHERIDAN ST
City-State-Zip:	HOLLYWOOD FL 33021

Title	VPD
Name	VARGAS, OMAR
Address	3751 SHERIDAN ST
City-State-Zip:	HOLLYWOOD FL 33021

Title	D
Name	FELIZ, EDUARDO
Address	3751 SHERIDAN ST
City-State-Zip:	HOLLYWOOD FL 33021

Title	TREASURER, DIRECTOR
Name	MENDEZ, JOEL
Address	3751 SHERIDAN STREET
City-State-Zip:	HOLLYWOOD FL 33024

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: MARTIN VARGAS

PED

01/28/2020

Electronic Signature of Signing Officer/Director Detail_____
Date