

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15000006158

Entity Name: PUNTO VERTICAL MINISTRIES, INC.**Current Principal Place of Business:**1665 MALABAR RD
MALABAR , FL 32950**Current Mailing Address:**PO BOX 101451
PALM BAY, FL 32910 US**FEI Number:** 47-4365593**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JUARBE, HECTOR M
707 ATLANTIS ROAD SE
PALM BAY, FL 32909 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	PRESIDENT
Name	JUARBE, HECTOR M
Address	707 ATLANTIS ROAD SE
City-State-Zip:	PALM BAY FL 32909

Title	SECRETARY
Name	VIDAL, LESANDRA
Address	707 ATLANTIS ROAD SE
City-State-Zip:	PALM BAY FL 32909

Title	DIRECTOR
Name	GOMEZ, NELSON
Address	3703 ALAFAYA HEIGHTS RD # 317
City-State-Zip:	ORLANDO FL 32828

Title	TREASURER
Name	BUKOWSKI, KENNETH EDWARD
Address	1055 PANDORA ROAD SE
City-State-Zip:	PALM BAY FL 32909

Title	DIRECTOR
Name	RAMOS, DAVID
Address	408 ULM ROAD NW
City-State-Zip:	PALM BAY FL 32907

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: KENNETH BUKOWSKI**TREASURER****01/27/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date