

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

DOCUMENT# N17000008285

**Entity Name:** IGLESIA CASA DE VIDA ESTRUENDO DE PODER, INC.**Current Principal Place of Business:**101 W CYPRESS ST. SUITE 2B  
KISSIMMEE , FL 34741**Current Mailing Address:**550 CHAPEL TRACE DRIVE  
APT.205  
ORLANDO, FL 32807 US**FEI Number:** 82-2482064**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**RODRIGUEZ, WANDA L  
3202 ESPINOSA DRIVE  
APT 211  
KISSIMMEE, FL 34741 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:** WANDA L. RODRIGUEZ

01/03/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

|                 |                                   |
|-----------------|-----------------------------------|
| Title           | PD                                |
| Name            | RIOS, EDWIN A.                    |
| Address         | 550 CHAPEL TRACE DRIVE<br>APT.205 |
| City-State-Zip: | ORLANDO FL 32807                  |

|                 |                                |
|-----------------|--------------------------------|
| Title           | SD                             |
| Name            | RODRIGUEZ, WANDA L.            |
| Address         | 3202 ESPINOSA DRIVE<br>APT 211 |
| City-State-Zip: | KISSIMMEE FL 34741             |

|                 |                                   |
|-----------------|-----------------------------------|
| Title           | VD                                |
| Name            | ROJAS, JENY I.                    |
| Address         | 550 CHAPEL TRACE DRIVE<br>APT.205 |
| City-State-Zip: | ORLANDO FL 32807                  |

|                 |                                     |
|-----------------|-------------------------------------|
| Title           | TD                                  |
| Name            | GONZALEZ , STEPHANIE                |
| Address         | 424 CHAPEL TRACE DRIVE<br>APTO. 102 |
| City-State-Zip: | ORLANDO FL 32807                    |

|                 |                                    |
|-----------------|------------------------------------|
| Title           | OD                                 |
| Name            | HERNANDEZ, JOSHUA                  |
| Address         | 424 CHAPEL TRACE DRIVE<br>APT. 102 |
| City-State-Zip: | ORLANDO FL 32807                   |

|                 |                    |
|-----------------|--------------------|
| Title           | OD                 |
| Name            | BADILLO , STEVEN   |
| Address         | 3202 ESPINOSA DR.  |
| City-State-Zip: | KISSIMMEE FL 34741 |

|                 |                                |
|-----------------|--------------------------------|
| Title           | OD                             |
| Name            | RONDÓN , DINORCA               |
| Address         | 11073 LAGUNA BAY DR<br>APT 214 |
| City-State-Zip: | ORLANDO FL 32821               |

|                 |                        |
|-----------------|------------------------|
| Title           | OD                     |
| Name            | RODRÍGUEZ , MARIBEL    |
| Address         | 915 5TH ST.<br>APT.204 |
| City-State-Zip: | WINTER HEAVEN FL 33881 |

*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:** EDWIN A. RIOS

PD

01/03/2024

Electronic Signature of Signing Officer/Director Detail

Date