## 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005509

Entity Name: INTERNATIONAL CHRISTIAN CENTER, INC.

FILED Mar 10, 2016 Secretary of State CC2715736743

## **Current Principal Place of Business:**

2414 W. OAKLAND PARK BLVD OAKLAND PARK. FL 33311

## **Current Mailing Address:**

C/O REV. EMILIO A. REYES 6955 LONG PINE CIR COCONUT CREEK. FL 33073 US

FEI Number: 65-0455253 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

REYES, EMILIO A DR. 6955 LONG PINE CIR COCONUT CREEK, FL 33073 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: EMILIO A REYES 03/10/2016

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PASTOR Title SECRETARY

Name REYES, EMILIO A DR. Name NEYRA, ROSA MRS

Address 6955 LONG PINE CIR Address 7390 N.W. 4TH STREET APT. 303

City-State-Zip: COCONUT CREEK FL 33073 City-State-Zip: PLANTATION FL 33317

Title ELDER Title ELDER

Name VERA, MANUEL Name FRYE, CLELIA

Address 16234 N.W. 17TH COURT Address 6807 NW 58TH STREET

City-State-Zip: PEMBROKE PINES FL 33028 City-State-Zip: TAMARAC FL 33321

Title ELDER Title TREASURER

Name ESPINOZA, LUIS Name REYES, LILYBETH

Address 890 NW 39 STREET Address 2414 W. OAKLAND PARK BLVD

APT 3

City-State-Zip: OAKLAND PARK FL 33311
City-State-Zip: FORT LAUDERDALE FL 33309

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: EMILIO A REYES PASTOR