

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000002303

Entity Name: IGLESIA CENTRO DE FE, INC.

Current Principal Place of Business:

29800 SW 153 CT
LEISURE CITY, FL 33033

Current Mailing Address:

29800 SW 153 CT
LEISURE CITY, FL 33033

FEI Number: 65-0562067

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

TORRES, FRANCISCO
15623 SW 297 TERRACE
LEISURE CITY, FL 33033 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 PD
Name TORRES, FRANCISCO
Address 15623 SW 297TH TERRACE
City-State-Zip: LEISURE CITY FL 33033

Title SD
Name PEDRAZA, ADRIANA BALI
Address 30505 SW 188AVE.
City-State-Zip: HOMESTEAD FL 33030

Title TD
Name TORRES, GLORIA
Address 15623 SW 297 TERRACE
City-State-Zip: LEISURE CITY FL 33033

Title D
Name ZALDANA, AMANDO
Address 510 NW. 4TH ST
City-State-Zip: HOMESTEAD FL 33030

Title D
Name EUCEDA, JOSE C
Address 14535 SW 297 TERR
City-State-Zip: LEISURE CITY FL 33033

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: FRANCISCO TORRES

PD

01/13/2017

Electronic Signature of Signing Officer/Director Detail

Date