## **2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N96000002892

Entity Name: IGLESIA CONGREGACIONAL DE DIOS PENTECOSTAL, INC.

**FILED** Apr 12, 2023 **Secretary of State** 1303199734CC

**Current Principal Place of Business:** 

235 NW 35TH ST MIAMI, FL 33127

## **Current Mailing Address:**

235 NW 35TH ST MIAMI. FL 33127

FEI Number: 65-0683235 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

UMANA, ROBERTO 235 NW 35TH ST MIAMI, FL 33127 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, PASTOR Title **TREASURER** 

UMANA, ROBERTO PORTILLO, AMADO Name Name

235 NW 35TH ST 4705 NW 191ST STREET Address Address

City-State-Zip: OPALOCKA FL 33055 MIAMI FL 33127 City-State-Zip:

**DEACONESS** Title Title ASSISTANT SECRETARY, ASST.

**SECRETARY** SIERRA, BLANCA Name

#1

MARTINEZ, FIDEL A Name Address 235 N.W. 35 ST.

3435 N.W. 3RD AVENUE Address

City-State-Zip: MIAMI FL 33127 City-State-Zip: MIAMI FL 33127

Title VP, SECRETARY Title **DIACON & ASSISTANT PASTOR** 

Name UMANA, ANA SONIA Name LOPEZ, OSCAR Address 270 NW 107 AVENUE Address 1730 NW 1ST CT

**APT# 202** APT 5

City-State-Zip: MIAMI FL 33172

City-State-Zip:

Title ASST. TREASURER

SANCHEZ, ELIDA ANGELICA Name

MIAMI FL 33172

235 NW 35TH STREET Address

APT#1

City-State-Zip: MIAMI FL 33127

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.

04/12/2023 SIGNATURE: ROBERTO UMANA **PRESIDENT** 

Electronic Signature of Signing Officer/Director Detail

Date