

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006975

FILED  
Apr 20, 2006  
Secretary of State

Entity Name: CENTRO CRISTIANO NUEVA VISION, INC.

**Current Principal Place of Business:**

744 N DEAN RD  
ORLANDO, FL 32825

**New Principal Place of Business:**

7540 GRAND AVE  
WINTER PARK, FL 32792

**Current Mailing Address:**

2269 SORRENTO CR  
WINTER PARK, FL 32792

**New Mailing Address:**

FEI Number: 30-0041538      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DIAZ, VICTOR M  
2269 SORRENTO CR  
WINTER PARK, FL 32792      US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: PD      ( ) Delete  
Name: DIAZ, VICTOR M  
Address: 2269 SORRENTO CR  
City-St-Zip: WINTER PARK, FL 32792

Title: ST      (X) Delete  
Name: MERCADO, ROSA  
Address: 10239 COMFORD CR  
City-St-Zip: ORLANDO, FL 32825

Title: M      (X) Delete  
Name: MERCADO, JAIME  
Address: 10239 COMFORT CR  
City-St-Zip: ORLANDO, FL 32825

Title: M      ( ) Delete  
Name: MEDINA, ANGEL  
Address: 523 COLUMBIA AVE  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: M      ( ) Delete  
Name: CRESPO, NOEL  
Address: 5051 TANGERINE AVE  
City-St-Zip: WINTER PARK, FL 32792

Title: M      ( ) Delete  
Name: SANTIAGO, EVA  
Address: 3130 S SEMORAN BLVD APT #301  
City-St-Zip: ORLANDO, FL 32822

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: VICTOR M DIAZ

PD

04/20/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date