# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Mar 29, 2004 8:00 am**
**Secretary of State**
03-29-2004 90066 030 ****61.25

DOCUMENT # N02000008975

1. Entity Name
CENTRO INTERNACIONAL DE ALABANZA HOMESTEAD, INC.

94038221

| Principal Place of Business | Mailing Address |
|---|---|
| ~~1422 EAST MOWRY DRIVE #208~~<br>~~HOMESTEAD, FL 33033~~ | 1422 EAST MOWRY DRIVE #208<br>HOMESTEAD, FL 33033 |

03012004 Chg-NP CR2E037 (10/03)

| 2. Principal Place of Business | 3. Mailing Address |
|---|---|
| 3381 N. KROME AVE. | 3381 N, KROME AVE |
| Suite, Apt. #, etc.: SUITE 200 | Suite, Apt. #, etc.: SUITE 200 |
| City & State: HOMESTEAD, FL | City & State: HOMESTEAD, FL |
| Zip: 33030 Country: MIAMI DADE | Zip: 33030 Country: MIAMI DADE |

4. FEI Number 33-1030274 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

| 6. Name and Address of Current Registered Agent | 7. Name and Address of New Registered Agent |
|---|---|
| IXCHU, ALBERT E<br>~~1422 EAST MOWRY DRIVE #208~~<br>~~HOMESTEAD, FL 33033~~ | Name: IXCHU, ALBERT E.<br>Street Address (P.O. Box Number is Not Acceptable): 3381 N. KROME AVE., SUITE 200<br>City: HOMESTEAD FL Zip Code: 33030 |

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Albert E. Ixchu President 3/25/04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is $61.25**
**Due by May 1, 2004**

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

**Make check payable to Florida Department of State**

| 10. OFFICERS AND DIRECTORS | | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 | | |
|---|---|---|---|---|---|
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | PD<br>IXCHU, ALBERT E<br>1422 EAST MOWRY DRIVE #208<br>HOMESTEAD, FL 33033 | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | VD<br>DUGAND, JOSE VICTOR<br>11331 SW 152ND COURT<br>MIAMI, FL 33196 | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | SD<br>IXCHU, LIZZBETH E<br>1422 EAST MOWRY DRIVE #208<br>HOMESTEAD, FL 33033 | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | TD<br>RUIZ, ANDRES I<br>3830 CRESTWOOD CIRCLE<br>WESTON, FL 33331 | ☒ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | TD<br>STAPEL, GERARD<br>16473 SW 99TH ST.<br>MIAMI, FL 33196 | ☐ Change ☒ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>GOVEA, MARIA<br>14917 SW 89TH LANE<br>MIAMI, FL 33196 | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>GARCIA, CHRISTIAN<br>8801 FOUNTAINBLEU BLVD #408<br>MIAMI, FL 33172 | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Change ☐ Addition |

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** Albert E. Ixchu 3/25/04 (305) 246-3788
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #