2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2005
Secretary of State

DOCUMENT# N02000008975

Entity Name: CENTRO INTERNACIONAL DE ALABANZA HOMESTEAD, INC.

Current Principal Place of Business:

381 N. KROME AVE., STE 200
HOMESTEAD, FL 33030

New Principal Place of Business:

Current Mailing Address:

381 N. KROME AVE., STE 200
HOMESTEAD, FL 33030

New Mailing Address:

FEI Number: 33-1030274 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

IXCHU, ALBERT E
381 N. KROME AVE., STE 200
HOMESTEAD, FL 33030 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: IXCHU, ALBERT E
Address: 1422 EAST MOWRY DRIVE #208
City-St-Zip: HOMESTEAD, FL 33033

Title: VD ( ) Delete
Name: DUGAND, JOSE VICTOR
Address: 11331 SW 152ND COURT
City-St-Zip: MIAMI, FL 33196

Title: SD ( ) Delete
Name: IXCHU, LIZZBETH E
Address: 1422 EAST MOWRY DRIVE #208
City-St-Zip: HOMESTEAD, FL 33033

Title: TD ( ) Delete
Name: STAPEL, GERARD
Address: 16473 SW 99TH ST.
City-St-Zip: MIAMI, FL 33196

Title: D ( ) Delete
Name: GOVEA, MARIA
Address: 14917 SW 89TH LANE
City-St-Zip: MIAMI, FL 33196

Title: D ( ) Delete
Name: GARCIA, CHRISTIAN
Address: 8801 FOUNTAINBLEU BLVD #408
City-St-Zip: MIAMI, FL 33172

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 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 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: ALBERT E. IXCHU PD 04/30/2005

Electronic Signature of Signing Officer or Director — Date