

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 03, 2006
Secretary of State**

DOCUMENT# N05000000915

Entity Name: CENTRO UMBANDISTA SAN JORGE INC.

Current Principal Place of Business:

120 BEACOM BOULEVARD
MIAMI, FL 33135 US

New Principal Place of Business:

Current Mailing Address:

120 BEACOM BOULEVARD
MIAMI, FL 33135 US

New Mailing Address:

FEI Number: 20-2584358 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRUGADA, JUAN A
4672 NW 114TH AVE
301
DORAL, FL 33178 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: P () Delete
Name: BRUGADA, JUAN A
Address: 4672 NW 114TH AVE. APT.301
City-St-Zip: DORAL, FL 33178

Title: VP () Delete
Name: URETA, HEBER J
Address: 8035 SW 107TH AVE. APT. 214
City-St-Zip: MIAMI, FL 33173

Title: D () Delete
Name: NIGRO, MAGALY
Address: 4672 NW 114TH. AVE. APT. 301
City-St-Zip: DORAL, FL 33178

Title: D (X) Delete
Name: PECCHIO, CLAUDIA
Address: 10990 NW 62ND. TERRACE
City-St-Zip: DORAL, FL 33178

Title: D (X) Delete
Name: CAMPOS, JOEL
Address: 4580 NW 114TH. AVE. APT. 1206
City-St-Zip: DORAL, FL 33178

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: NIGRO, MAGALY
Address: 4672 NW 114TH. AVE. APT. 301
City-St-Zip: DORAL, FL 33178

Title: D (X) Change () Addition
Name: CAMPOS, JOEL
Address: 4580 NW 114TH. AVE. APT. 1206
City-St-Zip: DORAL, FL 33178

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: JUAN A. BRUGADA

P

04/03/2006

Electronic Signature of Signing Officer or Director

_____ Date