

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 30, 2008
Secretary of State**

DOCUMENT# N06000007994

Entity Name: CASA DEL DIOS VIVIENTE, INC.

Current Principal Place of Business:

6700 NW 20TH AVE
FT LAUDERDALE, FL 33309 US

New Principal Place of Business:

6700 NW 20TH AVE
FT LAUDERDALE, FL 33309 US

Current Mailing Address:

PO BOX 97-0761
COCONUT CREEK, FL 33097 US

New Mailing Address:

6700 NW 20TH AVE
FT LAUDERDALE, FL 33309 US

FEI Number: 20-5351121 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REYES, JOHANA
4069 CARAMBOLA CIR N
COCONUT CREEK, FL 33066 US

Name and Address of New Registered Agent:

REYES, JOHANA
4400 NW 30TH ST APT 123
COCONUT CREEK, FL 33066 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: _____ 04/30/2008
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: VILLAMIZAR, RUTH
Address: 4069 CARAMBOLA CIR N
City-St-Zip: COCONUT CREEK, FL 33066 US

Title: VD () Delete
Name: REYES, JOHANA
Address: 4069 CARAMBOLA CIR N
City-St-Zip: COCONUT CREEK, FL 33066 US

Title: TD () Delete
Name: SERRANO, MARIA A
Address: 4069 CARAMBOLA CIR N
City-St-Zip: COCONUT CREEK, FL 33066 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD (X) Change () Addition
Name: REYES, JOHANA
Address: 4400 NW 30TH ST APT 123
City-St-Zip: COCONUT CREEK, FL 33066 US

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

I hereby certify that the information supplied with this filing does not qualify 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: JOHANA REYES VD 04/30/2008
Electronic Signature of Signing Officer or Director Date