

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002463

FILED  
Apr 22, 2007  
Secretary of State

Entity Name: CENTRO CRISTIANO FAMILIAR DE BOCA RATON, INC.

## Current Principal Place of Business:

21121 ORIOLE COUNTRY RD  
BOCA RATON, FL 33428 US

## New Principal Place of Business:

## Current Mailing Address:

21121 ORIOLE COUNTRY RD  
BOCA RATON, FL 33428 US

## New Mailing Address:

8825 RAMBLEWOOD DR.  
1509  
CORAL SPRINGS, FL 33071 US

FEI Number: 65-0838182

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

PUGLIESE, RICARDO M PD  
8825 RAMBLEWOOD DR. #1509  
CORAL SPRINGS, FL 33071 US

## Name and Address of New Registered Agent:

PUGLIESE, RICARDO M PD  
8825 RAMBLEWOOD DR.  
1509  
CORAL SPRINGS, FL 33071 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: RICARDO PUGLIESE

04/22/2007

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: PUGLIESE, RICARDO M  
Address: 8825 RAMBLEWOOD DR. #1509  
City-St-Zip: CORAL SPRINGS, FL 33071

Title: VD ( ) Delete  
Name: VALLEJO, MARYBEL  
Address: 3270 CORAL RIDGE DR  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: TRD ( ) Delete  
Name: PUGLIESE, ROSA  
Address: 8825 RAMBLEWOOD DR. #1509  
City-St-Zip: CORAL SPRINGS, FL 33071

Title: SD (X) Delete  
Name: RUIZ, OLGA  
Address: 1417 NW 62 AVE.  
City-St-Zip: MARGATE, FL 33063

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD (X) Change ( ) Addition  
Name: PUGLIESE, ROSA  
Address: 8825 RAMBLEWOOD DR. # 1509  
City-St-Zip: CORAL SPRINGS, FL 33071

Title: TRD (X) Change ( ) Addition  
Name: PUGLIESE, MARIA B  
Address: 8825 RAMBLEWOOD DR. #1509  
City-St-Zip: CORAL SPRINGS, FL 33071

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: RICARDO PUGLIESE

PD

04/22/2007

Electronic Signature of Signing Officer or Director

Date