2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002338

Apr 02, 2010 Secretary of State

Entity Name: CENTRO DE RESTAURACION LEVANTATE, INC.

Current Principal Place of Business: New Principal Place of Business:

6713 OSTEEN RD. 11945 HUDSON RIDGE DR

105

NEW PORT RICHEY, FL 34653 PORT RICHEY, FL 34668

New Mailing Address: Current Mailing Address:

6713 OSTEEN RD. 11945 HUDSON RIDGE DR 105

NEW PORT RICHEY, FL 34653 PORT RICHEY, FL 34668

FEI Number: 41-2170061 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ROSARIO, EDGARDO LUIS ROSARIO, EDGARDO LUIS 11945 HUDSON RIDGE DR. 6701 OSTÉEN RD. PORT RICHEY, FL 34668 US

NEW PORT RICHEY, FL 34653 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: 04/02/2010

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ROSARIO, EDGARDO L Name:

Address: 11945 HUDSON RIDGE DR. #105 City-St-Zip: PORT RICHEY, FL 34668

Title: **TRES**

Name: ROSARIO, ROSA I

Address: 11945 HUDSON RIDGE DR. #105 City-St-Zip: PORT RICHEY, FL 34668

Title: SEC

QUIñONES, EDUARDO Name: Address: 12025 HUDSON RIDGE DR. #104

City-St-Zip: PORT RICHEY, FL 34668

Title: **TRUS**

Name: CHACON, RAY REV. 1140 SW MARIGOLD PL Address: City-St-Zip: FORT WHITE, FL 32038 US

I hereby 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 all other like empowered.

SIGNATURE: EDGARDO LUIS ROSARIO Ρ 04/02/2010