

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000006339

**FILED**  
**Apr 20, 2011**  
**Secretary of State**

**Entity Name:** CASA DE PROVISION INC.

**Current Principal Place of Business:**

2107 W COOL SPRINGS RD  
TAMPA, FL 33604

**New Principal Place of Business:**

3220 N. 40TH STREET  
TAMPA, FL 33605

**Current Mailing Address:**

2107 W COOL SPRINGS RD  
TAMPA, FL 33604

**New Mailing Address:**

P.O. BOX 152496  
TAMPA, FL 33684

**FEI Number:** 26-0463080

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RIVERA, ALBERTO  
2107 W COOL SPRINGS RD  
TAMPA, FL 33604 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  
Name: RIVERA, ALBERTO  
Address: 9207 W ROBSON STREET  
City-St-Zip: TAMPA, FL 33615

Title: S/T  
Name: RIVERA, LAURA M  
Address: 7007 DRURY ST  
City-St-Zip: TAMPA, FL 33635

Title: VP  
Name: GARCIA, JUAN E  
Address: 3330 W SPRUCE ST  
City-St-Zip: TAMPA, FL 33607 US

Title: V  
Name: GARCIA, LUCY  
Address: 3330 W SPRUCE ST  
City-St-Zip: TAMPA, FL 33607

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:** REV. JUAN EDUARDO GARCIA

VP

04/20/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date