

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002338

Entity Name: CENTRO DE RESTAURACION LEVANTATE, INC.

Current Principal Place of Business:

7140 CONGRESS STREET
NEW PORT RICHEY, FL 34653

Current Mailing Address:

6644 TIMBERCOVE LANE
NEW PORT RICHEY, FL 34653 US

FEI Number: 41-2170061

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

ROSARIO, EDGARDO LUIS
6644 TIMBERCOVE LANE
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: _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name ROSARIO, EDGARDO L
Address 6644 TIMBERCOVE LANE
City-State-Zip: NEW PORT RICHEY FL 34653

Title TRUSTEE
Name QUINONES, EDUARDO
Address 12025 HUDSON RIDGE DR. #104
City-State-Zip: PORT RICHEY FL 34668

Title SECRETARY, TREASURER
Name CHACON, RAY REV.
Address 1140 SW MARIGOLD PL
City-State-Zip: FORT WHITE FL 32038

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

FOUNDER / PASTOR

04/24/2015

Electronic Signature of Signing Officer/Director Detail

Date