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2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: CENTRO DE RESTAURACION LEVANTATE, INC.

6520 INDUSTRIAL DR. PORT RICHEY, FL 34668

#### **Current Mailing Address:**

DOCUMENT# N0500002338

6520 INDUSTRIAL DR. PORT RICHEY, FL 34668 US

# FEI Number: 41-2170061

## Name and Address of Current Registered Agent:

ROSARIO, EDGARDO LUIS 11945 HUDSON RIDGE DR. 105 PORT RICHEY, FL 34668 US Certificate of Status Desired: Yes

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

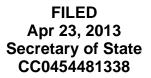
#### Officer/Director Detail :

Title	P	Title	TRES
Name	ROSARIO, EDGARDO L	Name	ROSARIO, ROSA I
Address	11945 HUDSON RIDGE DR. #105	Address	11945 HUDSON RIDGE DR. #105
City-State-Zip:	PORT RICHEY FL 34668	City-State-Zip:	PORT RICHEY FL 34668
Title	SEC	Title	TRUS
Name	QUINONES, EDUARDO	Name	CHACON, RAY REV.
Address	12025 HUDSON RIDGE DR. #104	Address	1140 SW MARIGOLD PL
Citv-State-Zip:	PORT RICHEY FL 34668	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	PRES.	04/23/2013
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Electronic Signature of Signing Officer/Director Detail



Date

Date