

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

Feb 07, 2008 08:00 AM
Secretary of State

DOCUMENT # 721521	
1. Entity Name CHRISTIAN COMMITMENT FOUNDATION, INC.	

Principal Place of Business 5436 S.W. 8 STREET CORAL GABLES FL 33134	Mailing Address 5436 S.W. 8 STREET CORAL GABLES FL 33134
--	--



2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

1st MOORE CR2E037 (10/07)	
4. FEI Number 23-7123317	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent SOSA, JORGE L ESQ. 4410 ALTON ROAD MIAMI BEACH FL 33140	
---	--

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

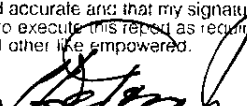
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE	DATE
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)	

FILE NOW: FEE IS \$61.25 Due By May 1, 2008	9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
--	---	--

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DE TORO, LORENZO 2950 SW 109 AVE MIAMI FL 33165 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD DE TORO, MARIA DEL CAR 2950 SW 109 AVE MIAMI FL 33165 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SOSA, JORGE 4410 ALTON RD. MIAMI BEACH FL 33140 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP MIRET, GERMAN 8260 SW 91ST STREET MIAMI FL ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP HERNANDEZ, ARMINDA 14612 SW 95 LANE MIAMI FL 33186 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition 000000819317 02/15/08-80079-002 61.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: LORENZO DE TORO  **02/01/08 (305) 443-2422**