

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 15, 2006 8:00 am
Secretary of State

02-15-2006 90024 010 ****70.00

DOCUMENT # 724397 1. Entity Name CENTRO CAMPESINO-FARMWORKER CENTER, INC.	
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Principal Place of Business 35801 S.W. 187TH AVENUE FLORIDA CITY, FL 33034	Mailing Address P O BOX 343449 FLORIDA CITY, FL 33034 US
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

01312006 Chg-NP CR2E037 (11/05)

4. FEI Number 59-1460598	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent	
AMBER AND AMBER 7731 SW 62ND AVENUE SUITE 202 MIAMI, FL 33143	

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.

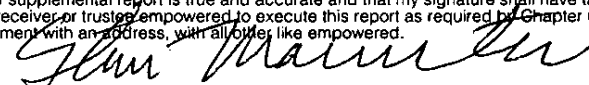
SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by May 1, 2006	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JENSEN, ROBERT 1550 N. KROME AVE. HOMESTEAD, FL ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SEGOR, JOSEPH 12801 SW 112 CT. MIAMI, FL ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP PRO, FERNANDO 20310 SW 106 AVE MIAMI, FL 33189 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BOGGS, COLLEEN 16300 SW 184 ST MIAMI, FL 33187 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S TAPIA, CATALINA 19891 SW 244 ST HOMESTEAD, FL 33031 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ALDANA, CRISTINA 18531 SW 957 ST HOMESTEAD, FL 33034 ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR WILFRID PRESSA 281 SO KROME AVE HOMESTEAD, FL 33034 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR MARCO TEJADA 11401 SW 72 PL MIAMI, FL 33156 ☐ 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 Chapter 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:  **(305) 245-7738**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #