2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#760663

Entity Name: LIGA ECUATORIANA DE FLORIDA INC.

FILED Apr 24, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

12227 S.W. 132ND COURT MIAMI, FL 33186

Current Mailing Address: New Mailing Address:

12227 S.W. 132ND COURT MIAMI, FL 33186

FEI Number: 59-1102060 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

 DEL CASTILLO, FRANKLIN
 ORTIZ, YOVANNY

 15361 SW 43 TERRACE
 12227 SW 132 CT

 MIAMI, FL 33185 US
 MIAMI, FL 33186 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: YOVANNY ORTIZ 04/24/2004

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

tle: PD () Delete Title: PD (X) Change () Addition

 Name:
 DEL CASTILLO, FRANKLIN
 Name:
 ORTIZ, YOVANNY

 Address:
 15361 SW 43 TERRACE
 Address:
 7225 W 11 CT

 City-St-Zip:
 MIAMI, FL 33185
 City-St-Zip:
 HIALEAH, FL 33014

Title: VPD () Delete Title: VPD (X) Change () Addition Name: ORIZ, GYOUANDY Name: DONOSO, MARCELO

Address: 7225 W 11 CT Address: 12227 SW 132 CT
City-St-Zip: HIALEAH, FL 33014 City-St-Zip: MIAMI, FL 33186

Title: T () Delete Title: T (X) Change () Addition

 Name:
 ULLOA, JOSE
 Name:
 VILLAGOMEZ, FABRICIO

 Address:
 20805 SW 85 CT
 Address:
 4723 SW 185 AVE

 City-St-Zip:
 MIAMI, FL 33189
 City-St-Zip:
 MIRAMAR, FL 33029

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: YOVANNY ORTIZ PD 04/24/2004