

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 08, 2005
Secretary of State**

DOCUMENT# 767126

Entity Name: CRUZADA ESTUDIANTIL Y PROFESIONAL PARA CRISTO, INC.

Current Principal Place of Business:

8537 SW 133 PLACE
MIAMI, FL 33183 US

New Principal Place of Business:

Current Mailing Address:

8537 SW 133 PLACE
MIAMI, FL 33183 US

New Mailing Address:

FEI Number: 59-2305956 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FARFAN, CLAUDIA
5174 NW 108 CT
MIAMI, FL 33178 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DOMINGO, PERCY
Address: 8537 SW 133 PLACE
City-St-Zip: MIAMI, FL 33183 US

Title: V () Delete
Name: EDUARDO, MARIN
Address: 212-48TH STREET, APT. #3
City-St-Zip: UNION CITY, NJ 07087 US

Title: D () Delete
Name: DIAZ, CARLOS M
Address: 1714 OSPREY BLVD
City-St-Zip: WESTON, FL 33327

Title: T () Delete
Name: RINCON, OLGA
Address: 15911 SW 90 CT
City-St-Zip: MIAMI, FL 33157

Title: S () Delete
Name: CLAUDIA, FARFAN
Address: 5174 NW 108 CT
City-St-Zip: MIAMI, FL 33178

Title: D () Delete
Name: ANGELA, OTERO
Address: 3851 ESTEPONA AVE
City-St-Zip: MIAMI, FL 33178

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
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City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: DOMINGO PERCY

P

04/08/2005

Electronic Signature of Signing Officer or Director

Date