2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 22, 2005
Secretary of State

DOCUMENT# N00000000781

Entity Name: MEXICAN CULTURE ORGANIZATION, CORP.

Current Principal Place of Business:

199 MILLS RD
DELAND, FL 32724

New Principal Place of Business:

207 S SUMMIT ST
CRESCENT CITY, FL 32112

Current Mailing Address:

199 MILLS RD
DELAND, FL 32724

New Mailing Address:

PO BOX 441
SEVILLE, FL 32190

FEI Number: 59-3701173 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

JAIMES, MAGDALENA
199 MILLS RD
DELAND, FL 32724 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: D ( ) Delete
Name: GALARZA, MARIA C
Address: P.O. BOX 904
City-St-Zip: PIERSON, FL 32180

Title: D ( ) Delete
Name: JAIMES, APOLONIA
Address: 271 W DAVIS ST
City-St-Zip: DELEON SPRINGS, FL 32130

Title: D ( ) Delete
Name: JAIMES, MAGDALENA
Address: 199 MILLS RD
City-St-Zip: DELAND, FL 32724

Title: T ( ) Delete
Name: JAIMES, ANTONIO
Address: 121 1/2 WOOODLAND BLVD
City-St-Zip: DELAND, FL 32724

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
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: MAGDALENA JAIMES D 02/22/2005
Electronic Signature of Signing Officer or Director — Date