2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006048

May 01, 2006 Secretary of State

FILED

Entity Name: CHRIST CENTER INTERNATIONAL, INC.

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

8527 PINES BLVD. SUITE 201

PEMBROKE PINES, FL 33024

Current Mailing Address: New Mailing Address:

10691 N KENDALL DRIVE SUITE 304 MIAMI, FL 33176

FEI Number: 65-1039387 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

GARCIA, MARIO GARCIA, MARIO

 10691 N KENDALL DRIVE
 10691 N KENDALL DRIVE

 SUITE 110
 SUITE 304

 MIAMI, FL 33176 US
 MIAMI, FL 33176 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: MARIO GARCIA 05/01/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 GARCIA, MARIO
 Name:
 GARCIA, MARIO

Address: 8527 PINES BLVD., SUITE 201 Address: 10691 N. KENDALL DR., SUITE 304

City-St-Zip: PEMBROKE PINES, FL 33024 City-St-Zip: MIAMI, FL 33176

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

 Name:
 GARCIA, WANDA
 Name:
 GARCIA, WANDA

 Address:
 8527 PINES BLVD., SUITE 201
 Address:
 12280 SW 100TH ST.

 City-St-Zip:
 PEMBROKE PINES, FL 33024
 City-St-Zip:
 MIAMI, FL 33186 25

Title: D () Delete Title: () Change () Addition

 Name:
 CLIFFORD, JO
 Name:

 Address:
 3405 SW COLLEGE RD., SUITE 203
 Address:

 City-St-Zip:
 OCALA, FL 34474
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 RODRIGUEZ, ÉRICA
 Name:

 Address:
 10691 N. KENDALL DRIVE, SUITE 304
 Address:

 City-St-Zip:
 MIAMI, FL 33176
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: MARIO GARCIA PD 05/01/2006