2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006975

Title:

Name:

Address:

City-St-Zip:

Entity Name: CENTRO CRISTIANO NUEVA VISION, INC.

FILED Mar 28, 2007 Secretary of State

Current Pr	incipal Place o	of Business:	New Prince	New Principal Place of Business:			
7540 GRAN WINTER P.	ND AVE ARK, FL 32792	2					
Current Ma	ailing Address	:	New Maili	New Mailing Address:			
2269 SORF WINTER P.	RENTO CR ARK, FL 32792	2		7121 TIMBER DRIVE WINTER PARK, FL 32792			
FEI Number:	30-0041538	FEI Number Applied For ()	FEI Number Not App	icable ()	Certificate of Status Desire	d()	
Name and	Address of Cu	rrent Registered Agent:	Name and	Address of N	ew Registered Agent:		
DIAZ, VICT 2269 SORF WINTER P.	OR M RENTO CR ARK, FL 32792	. US	7121 TIMB	DIAZ, VICTOR M 7121 TIMBER DRIVE WINTER PARK, FL 32792 US			
The above in the State		bmits this statement for the p	ourpose of changing i	ts registered of	fice or registered agent,	or both,	
SIGNATURE:				03/28/2007			
	Electronic	Signature of Registered Age	ent		Date		
OFFICERS	AND DIRECT	ORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PD () E DIAZ, VICTOR M 2269 SORRENTO WINTER PARK, F		Title: Name: Address: City-St-Zip:	PD (X) DIAZ, VICTOR N 7121 TIMBER D WINTER PARK,	RIVE		
Title: Name: Address: City-St-Zip:	MEDINA, ANGEL 523 COLUMBIA A	Delete NVE RINGS, FL 32714	Title: Name: Address: City-St-Zip:	M (X) CRESPO, PEDF 5051 TANGERIN WINTER PARK,	NE AVE		
Title: Name: Address: City-St-Zip:	M () CRESPO, NOEL 5051 TANGERINI WINTER PARK, F		Title: Name: Address: City-St-Zip:	TRES (X) HERNANDEZ, M 10988 ARBOR V ORLANDO, FL	/IEW BLVD		
Title: Name: Address: City-St-Zip:	SANTIAGO, EVA	Delete N BLVD APT #301 2822	Title: Name: Address: City-St-Zip:	SEC (X) CRESPO, EILEE 5051 TANGERIN WINTERPARK,	NE AVE		

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: VICTOR DIAZ PD 03/28/2007

() Delete

() Change (X) Addition

HERNANDEZ, GEORGE

ORLANDO, FL 32825

10988 ARBOR VIEW BLVD