

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007723

FILED
Feb 21, 2005
Secretary of State

Entity Name: CASA DE ALABANZA INTERNACIONAL, INC.

Current Principal Place of Business:

2500 SOUTH HIGHWAY #27
CLERMONT, FL 34711 US

New Principal Place of Business:

105 S. GALENA ST.
MINNEOLA, FL 34755 US

Current Mailing Address:

PO BOX 120862
CLERMONT, FL 34712 US

New Mailing Address:

FEI Number: 59-3756364 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SANTIAGO, RAMON L
3351 MATTSON DRIVE
ORLANDO, FL 32825 US

Name and Address of New Registered Agent:

SANTIAGO, RAMON L
15550 JOHNS LAKE RD.
CLERMONT, FL 34711 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: _____

02/21/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SANTIAGO, RAMON L
Address: 3351 MATTSON DRIVE
City-St-Zip: ORLANDO, FL 32825 US

Title: VTD () Delete
Name: SANTIAGO, DARLENE
Address: 3351 MATTSON DRIVE
City-St-Zip: ORLANDO, FL 32825 US

Title: SD () Delete
Name: ARVELO, RICARDO M
Address: 639 TOWNESQUARE WAY, APT. 921
City-St-Zip: ORLANDO, FL 32818 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SANTIAGO, RAMON L
Address: 15550 JOHNS LAKE RD
City-St-Zip: CLERMONT, FL 34711 US

Title: VTSD (X) Change () Addition
Name: SANTIAGO, DARLENE
Address: 15550 JOHNS LAKE RD
City-St-Zip: CLERMONT, FL 34711 US

Title: D (X) Change () Addition
Name: ARVELO, RICARDO M
Address: 220 RIDGECREST LOOP APT. B
City-St-Zip: CLERMONT, FL 34711 US

Title: D () Change (X) Addition
Name: ALICEA, XAVIER
Address: 1850 CAMBRIDGE COVE CR. APT. 101
City-St-Zip: LAKE LAND, FL 33580 US

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: DARLENE SANTIAGO

VTSD

02/21/2005

Electronic Signature of Signing Officer or Director

Date