

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000442

FILED
May 09, 2006
Secretary of State

Entity Name: CONFERENCIA LATINOAMERICANA DE COMPAÑIAS EXPRESS, INC.

Current Principal Place of Business:

1212 MARIANA AVE
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

1212 MARIANA AVE
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 75-2984785 **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:

CAPLAN, FRANKLIN H ESQ.
BERGER SINGERMANN, P.A.
200 S. BISCAYNE BLVD., SUITE 1000
MIAMI, FL 33313 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PINSON, PABLO
Address: 8400 SW 10 ST STC
City-St-Zip: FORT LAUDERDALE, FL 33329

Title: D () Delete
Name: DONOSO, HUGO
Address: 2230 NW 29 AVE STE 103
City-St-Zip: MIAMI, FL 33122

Title: D () Delete
Name: GUEVERA, ANA
Address: 14701 NW 77TH AVE
City-St-Zip: MIAMI LAKES, FL 330142559

Title: D () Delete
Name: SANTEIRO, FRANCISCO X
Address: 701 WATERFORD WAY STE 1000
City-St-Zip: MIAMI, FL 33126

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 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: MANUEL ARAGON

EXEC

05/09/2006

Electronic Signature of Signing Officer or Director

Date