

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001697

FILED  
Apr 29, 2004  
Secretary of State

Entity Name: ORGANIZATION CHILDREN OF THE WORLD, INC.

**Current Principal Place of Business:**

8883 FONTAINEBLEAU BLVD., #101  
MIAMI, FL 33172

**New Principal Place of Business:**

4315 S.W. 98 CT.  
MIAMI, FL 33165

**Current Mailing Address:**

8883 FONTAINEBLEAU BLVD., #101  
MIAMI, FL 33172

**New Mailing Address:**

P.O. BOX 227241  
MIAMI, FL 33122

FEI Number: 04-3621519

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LIRA, LIDA M  
8883 FONTAINEBLEAU BLVD., #101  
MIAMI, FL 33172

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

LIRA, LIDA M  
4315 S.W. 98 CT.  
MIAMI, FL 33165

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: \_\_\_\_\_

04/29/2004

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: LIRA, LIDA M  
Address: 8883 FONTAINEBLEAU BLVD., #101  
City-St-Zip: MIAMI, FL 33172

Title: TD ( ) Delete  
Name: NAPOLES, IVAN  
Address: 9965 S.W. 223 TERR.  
City-St-Zip: MIAMI, FL 33190

Title: SD ( ) Delete  
Name: DIAZ, LUIS  
Address: 8250 S.W. 152 AVENUE, APT. #1  
City-St-Zip: MIAMI, FL 33193

Title: VPD ( ) Delete  
Name: LAMAZARES, AVELINO  
Address: 5601 S.W. 69 AVE.  
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 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: LIDA M. LIRA

PD

04/29/2004

Electronic Signature of Signing Officer or Director

Date