

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003370

FILED
Apr 12, 2008
Secretary of State

Entity Name: CENTRO CRISTIANO ELIM, INC.

Current Principal Place of Business:

15541 SW 297TH ST
HOMESTEAD, FL 33030

New Principal Place of Business:

Current Mailing Address:

15541 SW 297TH ST
HOMESTEAD, FL 33030

New Mailing Address:

FEI Number: 37-1430630

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VELEZ, RONALD
15541 SW 297TH ST
HOMESTEAD, FL 33030 US

Name and Address of New Registered Agent:

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: PD () Delete
Name: VELEZ, RONALD PRES.
Address: 25510 S.W. 125 COURT
City-St-Zip: HOMESTEAD, FL 33032

Title: VPD () Delete
Name: RODRIGUEZ, MARIA
Address: 15541 SW 297TH ST
City-St-Zip: HOMESTEAD, FL 33030

Title: SD () Delete
Name: VEGA, FAUSTINO
Address: 431 NE 14 STREET
City-St-Zip: HOMESTEAD, FL 33032

Title: TD () Delete
Name: VEGA, TAIMI
Address: 431 NE 14 STREET
City-St-Zip: HOMESTEAD, FL 33032

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: VELEZ, RONALD PRES.
Address: 15541 S.W. 297 ST
City-St-Zip: HOMESTEAD, FL 33033

Title: VPD (X) Change () Addition
Name: RODRIGUEZ, MARIA
Address: 15541 SW 297TH ST
City-St-Zip: HOMESTEAD, FL 33033

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 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: RONALD VELEZ

PD

04/12/2008

Electronic Signature of Signing Officer or Director

Date