2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005450

Entity Name: COMUNIDAD CRISTIANA INTERNACIONAL INC

FILED Apr 25, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

7310 SERENO CT. #117 4115 N GRACE ST TAMPA, FL 33634 TAMPA, FL 33607

Current Mailing Address: New Mailing Address:

P.O. BOX 261405 TAMPA, FL 336851405

FEI Number: 14-1841302 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

CRUZ, SARA M
7310 SERENO CT. #117
TAMPA, FL 33634 US

CRUZ, SARA M
4115 N GRACE ST
TAMPA, FL 33607 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: 04/25/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PD () Delete Title: PD (X) Change () Addition

 Name:
 ELVIR, JORGE
 Name:
 ELVIR, JORGE

 Address:
 7310 SERENO CT. #117
 Address:
 4115 N GRACE ST

 City-St-Zip:
 TAMPA, FL 33634
 City-St-Zip:
 TAMPA, FL 33607

Title: STD () Delete Title: STD (X) Change () Addition Name: CRUZ, SARA M Name: CRUZ, SARA M

Address: 7310 SERENO CT. #117 Address: 4115 N GRACE ST
City-St-Zip: TAMPA, FL 33634 City-St-Zip: TAMPA, FL 33607

 $\label{eq:title: VD (X) Change () Addition} \begin{tabular}{ll} Title: & VD & (X) Change () Addition \\ \end{tabular}$

 Name:
 DAVILA, DAISY
 Name:
 NORRIS, ALEJANDRA

 Address:
 18610 BURRELL RD.
 Address:
 4115 N GRACE ST

 City-St-Zip:
 ODESSA, FL 33556
 City-St-Zip:
 TAMPA, FL 33607

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: JORGE ELVIR PD 04/25/2006