

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N02000006661

FILED
Sep 10, 2003
Secretary of State

Entity Name: CENTRO CRISTIANO VISION DE DIOS CORP.

Current Principal Place of Business:

1127 S. SANFORD AVE
SANFORD, FL 32771

New Principal Place of Business:

1301 PALMETTO AVE.
SANFORD, FL 32771

Current Mailing Address:

1127 S. SANFORD AVE
SANFORD, FL 32771

New Mailing Address:

1301 PALMETTO AVE.
SANFORD, FL 32771

FEI Number: 82-0562523

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANTOS, ZAIDA
2439 S. LAKE AVENUE
A
SANFORD, FL 32771 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: P () Delete
Name: SANTOS, ZAIDA
Address: 2439 S. LAKE AVENUE #A
City-St-Zip: SANFORD, FL 32771

Title: V () Delete
Name: RAMIREZ, MANUEL
Address: 2865 GINLET DR.
City-St-Zip: DELTONA, FL 32738

Title: T () Delete
Name: JIMENEZ, LUIS M
Address: 255 ROSEDALE DR.
City-St-Zip: DELTONA, FL 32738

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SANTOS, ZAIDA
Address: 2439 S. LAKE AVENUE #A
City-St-Zip: SANFORD, FL 32771

Title: D (X) Change () Addition
Name: RIUTOR, ALBERTO
Address: 1301 PALMETTO AVE.
City-St-Zip: SANFORD, FL 32771

Title: TD (X) Change () Addition
Name: JIMENEZ, LUIS N
Address: 255 ROSEDALE DR.
City-St-Zip: DELTONA, FL 32738

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: LUIS N. JIMENEZ

T

09/10/2003

Electronic Signature of Signing Officer or Director

Date