

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007197

FILED  
Mar 01, 2006  
Secretary of State

**Entity Name:** REY DE REYES KING OF KINGS, INC.

**Current Principal Place of Business:**

16060 OKEECHOBEE BOULEVARD  
LOXAHATCHEE, FL 33470 US

**New Principal Place of Business:**

**Current Mailing Address:**

7 GREENWAY VILLAGE N.  
UNIT # 111  
ROYAL PALM BEACH, FL 334112964 US

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

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

LOPEZ, ALBERTO A PD  
7 GREENWAY VILLAGE N.  
UNIT # 111  
ROYAL PALM BEACH, FL 334112964 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: LOPEZ, ALBERTO A  
Address: 7 GREENWAY VILLAGE N., UNIT # 111  
City-St-Zip: ROYAL PALM BEACH, FL 334112964 US

Title: VPD ( ) Delete  
Name: LOPEZ, JUANITA  
Address: 7 GREENWAY VILLAGE N., UNIT # 111  
City-St-Zip: ROYAL PALM BEACH, FL 334112964 US

Title: SD ( ) Delete  
Name: MUNOZ, MARIA ROCIO  
Address: 7673 OVERLOOK DRIVE  
City-St-Zip: LAKE WORTH, FL 33467

Title: TD ( ) Delete  
Name: MUNOZ, BLANCA M  
Address: 3116 MARTIN AVENUE  
City-St-Zip: GREENACRES, FL 33463

**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: TD (X) Change ( ) Addition  
Name: MATAS, JOSE M  
Address: 49 CANDLENUT COURT  
City-St-Zip: ROYAL PALM BEACH, FL 33411

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: ALBERTO A. LOPEZ

PRES

03/01/2006

Electronic Signature of Signing Officer or Director

Date