2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 07, 2006
Secretary of State

DOCUMENT# N02000007900

Entity Name: REBANO COMPANERISMO CRISTIANO DE BROWARD, INC.

Current Principal Place of Business:

6339 JOHNSON ST.
HOLLYWOOD, FL 33024

New Principal Place of Business:

6475 TAFT STREET
HOLLYWOOD, FL 33024

Current Mailing Address:

11361 S.W. 20TH ST.
MIRAMAR, FL 33025

New Mailing Address:

FEI Number: 61-1428432 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CARRION, JUAN J PASTOR
11361 SW 20TH STREET
MIRAMAR, FL 33025 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: CARRION, JUAN J
Address: 11361 SW 20TH STREET
City-St-Zip: MIRAMAR, FL 33025

Title: VD ( ) Delete
Name: CARRION, ANNAL L
Address: 11361 SW 20TH STREET
City-St-Zip: MIRAMAR, FL 33025

Title: TD ( ) Delete
Name: QUINONES, RACHEL A
Address: 118180 NW 68 AVE
City-St-Zip: MIAMI, FL 33015

Title: SD ( ) Delete
Name: ARCE, JULISSA
Address: 504 NW 163 AVE.
City-St-Zip: PEMBROKE PINES, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change ( ) Addition
Name: CARRION, ANNA L
Address: 11361 SW 20TH STREET
City-St-Zip: MIRAMAR, FL 33025

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 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: JUAN J. CARRIÓN PD 02/07/2006

Electronic Signature of Signing Officer or Director — Date