## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000008592

JEANNOT, YVONNE

OCALA, FL 34473

140 MARION OAKS TRAIL

Name:

Address:

City-St-Zip:

Entity Name: AGAPE GRUPO CULTURAL, INC.

FILED Apr 30, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 2581 S.W. 155 LANE OCALA, FL 34473 **Current Mailing Address: New Mailing Address:** 2581 S.W. 155 LANE OCALA, FL 34473 **FEI Number:** FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: JEANNOT, YVONNE 140 MARIÓN OAKS TRAIL OCALA, FL 34473 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete DIAZ, LUIS A Name: Name: Address: 2581 S.W. 155 LANE Address: City-St-Zip: OCALA, FL 34473 City-St-Zip: Title: VD () Delete Title: () Change () Addition Name: DIAZ, YADIRA Name: Address: 2581 S.W. 155 LANE Address: City-St-Zip: OCALA, FL 34473 City-St-Zip: Title: () Delete Title: () Change () Addition DAVILA, ROCHELLE Name: Name: 16105 SW 21 TERR Address: Address: City-St-Zip: OCALA, FL 34473 City-St-Zip: Title: TD ( ) Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: YADIRA D. DIAZ VD 04/30/2004