

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001662

FILED
Jul 01, 2005
Secretary of State

Entity Name: TERCARIOS DE LOS SAGRADOS CORAZONES, INC.

Current Principal Place of Business:

2700 GLADES CIRCLE STE 110
WESTON, FL 33327

New Principal Place of Business:

2700 GLADES CIRCLE
SUITE 110
WESTON, FL 33327

Current Mailing Address:

2700 GLADES CIRCLE STE 110
WESTON, FL 33327

New Mailing Address:

2700 GLADES CIRCLE
SUITE 110
WESTON, FL 33327

FEI Number: 56-2319390 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

DE LOS SAGRADOS, TERRCIARIOS
2700 GLADES CIRCLE STE 110
WESTON, FL 33327 US

Name and Address of New Registered Agent:

DE LOS SAGRADOS, TERCARIOS
2700 GLADES CIRCLE
SUITE 110
WESTON, FL 33327 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: HERNAN CORDOBA

07/01/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MANGIAMELLI, DAVID
Address: DON VIGANO NO 23
City-St-Zip: GARBAGHAE ILANESE ITALY, OC

Title: VD () Delete
Name: SANABRIA, EDGAR
Address: CARRERA 18 #54N-15
City-St-Zip: POPAYAN COLOMBIA, OC

Title: SD () Delete
Name: CORDOBA, HERNAN
Address: 1129 BIRCHWOOD RD
City-St-Zip: WESTON, FL 33327

Title: TD () Delete
Name: ZARMATI, LUZ K
Address: 1129 BIRCHWOOD RD
City-St-Zip: WESTON, FL 33327

Title: TD () Delete
Name: FILIPPI, ADOLFO
Address: STRADA GOTI LOCALITA BELEVEDERE 27
City-St-Zip: SAN GIORGIO PLACENTINO ITALY, OC

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: () 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 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: HERNAN CORDOBA

SD

07/01/2005

Electronic Signature of Signing Officer or Director

Date