

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N0300002246

1. Entity Name
COMUNIDAD CRISTIANA DORAL, INC.



07 JUN 18 AM 7:25

CLERK OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
7915 NW 53RD STREET
DORAL, FL 33166

Mailing Address
7915 NW 53RD STREET
DORAL, FL 33166



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

12152006 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number
81-0601975

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HERNANDEZ, VICTOR
4384 NW 109TH PL
DORAL, FL 33178

Name

Cala, Victor

Street Address (P.O. Box Number is Not Acceptable)

7340 NW 114 AVE #202
City DORAL FL Zip Code 33178

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Amended AR is \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P
NAME VICTOR, HERNANDEZ H
STREET ADDRESS 4384 NW 109TH PL
CITY-ST-ZIP DORAL, FL 33178 ☒ Delete

TITLE P. (OVV) ☒ Change ☐ Addition
NAME VICTOR J. CALA
STREET ADDRESS 6440 NW 114 Ave, #425 7340 NW 114 AVE #202
CITY-ST-ZIP DORAL, FL 33178

TITLE T
NAME VENZAS, MAURO
STREET ADDRESS 9903 NW 52 LN
CITY-ST-ZIP DORAL, FL 33178 ☐ Delete

TITLE S
NAME EDUARDO, BENJAMIN
STREET ADDRESS 114 NW 60th Street, #277
CITY-ST-ZIP DORAL, FL 33178 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE VP
NAME MANITO, PAULA
STREET ADDRESS 8251 NW 8th St., #303
CITY-ST-ZIP MIAMI, FL 33126 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE S
NAME SANTIAGO, FRANCISCO
STREET ADDRESS 7725 SW 86 ST. Apt. 120
CITY-ST-ZIP MIAMI, FL 33143 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition
200104883592
06/26/07--01037--012 **\$1.25

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

[Signature]