

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002246

FILED
Feb 25, 2008
Secretary of State

Entity Name: COMUNIDAD CRISTIANA DORAL, INC.

Current Principal Place of Business:

7915 NW 53RD STREET
DORAL, FL 33166

New Principal Place of Business:

Current Mailing Address:

7915 NW 53RD STREET
DORAL, FL 33166

New Mailing Address:

FEI Number: 81-0601975

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CALA, VICTOR
7340 NW 114 AVENUE #202
DORAL, FL 33178 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: P () Delete
Name: CALA, VICTOR J
Address: 7340 NW 114 AVENUE #202
City-St-Zip: DORAL, FL 33178 US

Title: T () Delete
Name: VENZAIS, MAURO
Address: 9903 NW 52 LN
City-St-Zip: DORAL, FL 33178 US

Title: S () Delete
Name: EDUARDO, BENJAMIN
Address: 11411 NW 60TH STREET, #277
City-St-Zip: DORAL, FL 33178 US

Title: VP () Delete
Name: MANITO, PAULA
Address: 8251 NW 8TH STREET, #303
City-St-Zip: MIAMI, FL 33126 US

Title: S () Delete
Name: SANTIAGO, FRANCISCO
Address: 7725 SW 86 STREET, APT. 120
City-St-Zip: MIAMI, FL 33143 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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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 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: VICTOR CALA

P

02/25/2008

Electronic Signature of Signing Officer or Director

Date