2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 30, 2004
Secretary of State

DOCUMENT# N03000002502

Entity Name: CENTRO DE ADORACION NUEVA VISION, INC.

Current Principal Place of Business:

4365 KENNEDY AVE.
ORLANDO, FL 328128214

New Principal Place of Business:

11609 SOUTH ORANGE BLOSSOM TRAIL
203/204
ORLANDO, FL 32837

Current Mailing Address:

10961 PRIARIE HAWK DR.
ORLANDO, FL 32837

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SOSTRE, JULIO C
10961 PRAIRIE HAWK DR.
ORLANDO, FL 32837 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: SOSTRE, JULIO C
Address: 10961 PRAIRIE HAWK DR.
City-St-Zip: ORLANDO, FL 32837

Title: VTD ( ) Delete
Name: SOSTRE, LAURIE A
Address: 10961 PRAIRIE HAWK DR.
City-St-Zip: ORLANDO, FL 32837

Title: SD ( ) Delete
Name: LLANOS, CARLOS E
Address: 5110 WECHSLER CIRCLE
City-St-Zip: ORLANDO, FL 32824

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VTD (X) Change ( ) Addition
Name: SOSTRE, LAURA A
Address: 10961 PRAIRIE HAWK DR.
City-St-Zip: ORLANDO, FL 32837

Title: SD (X) Change ( ) Addition
Name: SOSTRE, LAURA A
Address: 10961 PRAIRIE HAWK DR.
City-St-Zip: ORLANDO, FL 32837

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: JULIO C SOSTRE PD 08/30/2004
Electronic Signature of Signing Officer or Director — Date