


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Aug 03, 2006 8:00 am
Secretary of State

08-03-2006 90003 003 ****61.25

DOCUMENT # ND3000002696	
1. Entity Name LA GRAN NOCHE INC.	

Principal Place of Business 5800 N CHURCH AVE SUITE 106 TAMPA FL 33614 US	Mailing Address 5800 N CHURCH AVE SUITE 106 TAMPA FL 33614 US
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30024038

2. Principal Place of Business 5800 N Church Ave	3. Mailing Address 5800 N. Church Ave
Suite, Apt. #, etc. Suite # 106	Suite, Apt. #, etc. Suite 106

2nd MOORE CR2E037 (4/06)

City & State Tampa, FL	City & State Tampa, FL
Zip 33614	Zip 33614
Country USA	Country USA

4. FEI Number 65-1180253	Applied For <input type="checkbox"/>
	Not Applicable <input type="checkbox"/>

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent LOPEZ, ALAIN 5800 N CHURCH AVE SUITE 106 TAMPA FL 33614

7. Name and Address of New Registered Agent Name Diaz, Aida Street Address (P.O. Box Number is Not Acceptable) 5800 N. Church Ave, Ste 106 City Tampa FL Zip Code 33614

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. Alain Lopez, Treasurer 7/27/06	
SIGNATURE	DATE

FILE NOW: FEE IS \$61.25 Due By September 6, 2006

9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete
P DIAZ, AIDA 5800 N CHURCH AVE #106 TAMPA FL 33614	<input type="checkbox"/> Delete
T LOPEZ, ALAIN 5800 N CHURCH AVE #106 TAMPA FL 33614	<input checked="" type="checkbox"/> Delete
S LACAYO, ANA 5800 N CHURCH AVE #106 TAMPA FL 33614	<input checked="" type="checkbox"/> Delete
[Empty]	<input type="checkbox"/> Delete
[Empty]	<input type="checkbox"/> Delete
[Empty]	<input type="checkbox"/> Delete
[Empty]	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
Secretary Zoraida Vazquez 5800 N. Church Ave #106 Tampa FL 33614	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
[Empty]	<input type="checkbox"/> Change <input type="checkbox"/> Addition
[Empty]	<input type="checkbox"/> Change <input type="checkbox"/> Addition
[Empty]	<input type="checkbox"/> Change <input type="checkbox"/> 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: Alain Lopez, Treasurer 7/27/06 813-340-0349	DATE: 7/27/06