2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2004
Secretary of State

DOCUMENT# N03000003063

Entity Name: CENTRO VENEZOLANO AMERICANO "CVA", INC.

Current Principal Place of Business:

1725 MAIN ST., SUITE 205
WESTON, FL 33326

New Principal Place of Business:

1725 MAIN ST., SUITE 209
WESTON, FL 33326

Current Mailing Address:

1725 MAIN ST., SUITE 205
WESTON, FL 33326

New Mailing Address:

1725 MAIN ST., SUITE 209
WESTON, FL 33326

FEI Number: 20-1051070 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TOVAR, ILEANA A
1725 MAIN ST., SUITE 205
WESTON, FL 33326

Name and Address of New Registered Agent:

ARIAS TOVAR, ILEANA A ESQ
1725 MAIN ST., SUITE 209
WESTON, FL 33326

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: ILEANA ARIAS TOVAR, ESQ 04/27/2004
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: CONKRIGHT, WILLIAM
Address: 1725 MAIN ST., SUITE 205
City-St-Zip: WESTON, FL 33326

Title: VD ( ) Delete
Name: OMANA, CARLOS
Address: 1725 MAIN ST., SUITE 205
City-St-Zip: WESTON, FL 33326

Title: TD ( ) Delete
Name: BAPTISTA, FEDERICO
Address: 1725 MAIN ST., SUITE 205
City-St-Zip: WESTON, FL 33326

Title: SD ( ) Delete
Name: BANTANCOURT, REBECCA
Address: 1725 MAIN ST., SUITE 205
City-St-Zip: WESTON, FL 33326

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: CONKRIGHT, WILLIAM
Address: 1725 MAIN ST., SUITE 209
City-St-Zip: WESTON, FL 33326

Title: VD (X) Change ( ) Addition
Name: OMANA, CARLOS
Address: 1725 MAIN ST., SUITE 209
City-St-Zip: WESTON, FL 33326

Title: TD (X) Change ( ) Addition
Name: BAPTISTA, FEDERICO
Address: 1725 MAIN ST., SUITE 209
City-St-Zip: WESTON, FL 33326

Title: SD (X) Change ( ) Addition
Name: BANTANCOURT, REBECCA
Address: 1725 MAIN ST., SUITE 209
City-St-Zip: WESTON, FL 33326

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: WILLIAM A CONKRIGHT PD 04/27/2004
Electronic Signature of Signing Officer or Director Date