
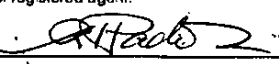
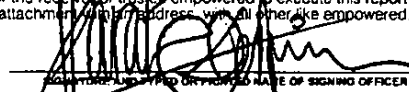


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 19, 2006 8:00 am
Secretary of State

04-24-2006 90390 021 ****69.00

DOCUMENT # N03000004022			
1. Entity Name CLUB DE LIDERES DE EXCELENCIA, INC.			
Principal Place of Business 6961 TAFT ST. HOLLYWOOD, FL 33024		Mailing Address 6961 TAFT ST. HOLLYWOOD, FL 33024	
2. Principal Place of Business 3245 NW 100 Av. 08 Suite, Apt. #, etc. Unit B		3. Mailing Address PO BOX 848004 Suite, Apt. #, etc.	
City & State Doral, FL		City & State Pembroke Pines, FL	
Zip 33178		Country USA	
4. FEI Number 06-1714152		Applied For Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent GARCIA, MARIA J 6961 TAFT ST. HOLLYWOOD, FL 33024		7. Name and Address of New Registered Agent Name: Rosa E. Pacheco Street Address (P.O. Box Number is Not Acceptable): 3454 NW 59th Place City: Tamiami FL Zip Code: 33319	
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:  DATE: 5/15/06			
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ZARATE, HECTOR 6961 TAFT ST. HOLLYWOOD, FL 33024 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PO Hector R. Zarate P.O. Box 848004 Pembroke Pines, FL 33084 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD RODRIGUEZ, JORGE 3111 NORTH 73 TERR. HOLLYWOOD, FL 33024 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Ines Boston 3001 NW 48th Ave. Apt 141 FLD. FL 33313 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CAL. RUBEN 3111 NORTH 73 TERR. HOLLYWOOD, FL 33024 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SO Mila Osos Chavez 3245 NW 100 Ave. Unit 8 Doral, FL 33178 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD GARCIA, MARIA J 3111 NORTH 73 TERR. HOLLYWOOD, FL 33024 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TO Ricardo Quintero PO BOX 848004 Pembroke Pines, FL 33084 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<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 recipient of trust or 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 to this address, with all other like empowered.			
SIGNATURE: 		HECTOR R. ZARATE 04-19-06. 754-422-4886	

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04182008 Chg-NP CR2E037 (11/05)