2004 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

FILED Jun 18, 2004 8:00 am Secretary of State 06-18-2004 90003 015 ****70.00

DOCUMENT # N0300005552 1. Entity Name CELAJE FOUNDATION, INC.							FADE	2000
Principal Place of Business 5121 FAIRFAX WEST LAKELAND, FL 33813 Mailing Address 5121 FAIRFAX WEST LAKELAND, FL 33813							5405	7986
Principal Place of Business		3. Mailing Address	Mailing Address		<u> </u> 			
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		06142004 Ch	g-NP CR2E	037 (10/03)	
City & State		City & State	City & State		4. FEI Number 32 - 00	82721	 	plied For
Zip	Zip Country Z		ip Country		5. Certificate of Status Desired \$8.75 Additional Fee Required			
	6. Name and Address of Current R	egistered Agent			7. Name and Addr	ess of New Registered	d Agent	
SPIEGEL & UTRERA, P.A.			L	Name Street Address (P.O. Box Number is Not Acceptable)				
1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145			-					
				City		F	L Zip Code	e
	named entity submits this statement for ions of registered agent.	the purpose of changing its	registered	office or register	red agent, or both, in t	he State of Florida. I ar	m familiar with,	and accept
SIGNATURE .	Signature, typed or printed mane of registered agent an	nd title if numbers the (MOT	E. Periistand A	igent signalure required	n when rejectating	DATE		i
		to the inappreating. (NO)	L. negistered A	igent signature regunet	a when remisioning,	DAIL	-	
Di	Filing Fee is \$61.25 ue by September 8, 2004	9. Election Car Trust Fund C			\$5.00 May Be Added to Fees		ck payable to artment of St	
D:	· ·	Trust Fund (ı.	Added to Fees		artment of St	tate
10.	ue by September 8, 2004 OFFICERS AND DIRE PSTD	Trust Fund (TITLE	ı.	Added to Fees	Florida Dep	artment of St	tate
10. TITLE NAME	ue by September 8, 2004 OFFICERS AND DIRE PSTD HERNANDEZ, OWEN	Trust Fund C	TITLE NAME		Added to Fees	Florida Dep	artment of St	tate
10. TITLE NAME STREET ADDRESS	oFICERS AND DIRE PSTD HERNANDEZ, OWEN 5121 FAIRFAX WEST	Trust Fund C	11. TITLE NAME STREET	ADDRESS ADDRESS	Added to Fees	Florida Dep	artment of St	tate
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRE PSTD HERNANDEZ, OWEN 5121 FAIRFAX WEST LAKELAND, FL 33813	Trust Fund C	11. TITLE NAME STREET CITY-ST	ADDRESS ADDRESS	Added to Fees	Florida Dep	artment of St DIRECTORS IN	tate
10. TITLE NAME STREET ADDRESS	oFICERS AND DIRE PSTD HERNANDEZ, OWEN 5121 FAIRFAX WEST	Trust Fund C	11. TITLE NAME STREET	ADDRESS ADDRESS	Added to Fees	Florida Dep	artment of St	tate
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AND DIRE PSTD HERNANDEZ, OWEN 5121 FAIRFAX WEST LAKELAND, FL 33813	Trust Fund C	TITLE NAME STREET CITY-ST	ADDRESS ADDRESS	Added to Fees	Florida Dep	artment of St DIRECTORS IN	tate
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AND DIRE PSTD HERNANDEZ, OWEN 5121 FAIRFAX WEST LAKELAND, FL 33813 D HERNANDEZ, ELIZABETH	Trust Fund C	TITLE NAME STREET CITY-ST	ADDRESS 1-ZIP ADDRESS	Added to Fees	Florida Dep	artment of St DIRECTORS IN	tate
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PSTD HERNANDEZ, OWEN 5121 FAIRFAX WEST LAKELAND, FL 33813 D HERNANDEZ, ELIZABETH 5121 FAIRFAX WEST LAKELAND, FL 33813	Trust Fund C	11. TITLE NAME STREET CITY-ST TITLE NAME STREET STREET	ADDRESS 1-ZIP ADDRESS	Added to Fees	Florida Dep	artment of St DIRECTORS IN	tate
TO. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PSTD HERNANDEZ, OWEN 5121 FAIRFAX WEST LAKELAND, FL 33813 D HERNANDEZ, ELIZABETH 5121 FAIRFAX WEST LAKELAND, FL 33813 D HERNANDEZ, ELIZABETH 5121 FAIRFAX WEST LAKELAND, FL 33813 D HERNANDEZ, ABILIO	Trust Fund C	11. ITTLE NAME STREET CITY-SI TITLE NAME STREET CITY-SI TITLE NAME STREET CITY-S TITLE NAME NAME	ADDRESS 1-ZIP ADDRESS 1-ZIP	Added to Fees	Florida Dep	artment of St DIRECTORS IN Change Change	Addition Addition
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PSTD HERNANDEZ, OWEN 5121 FAIRFAX WEST LAKELAND, FL 33813 D HERNANDEZ, ELIZABETH 5121 FAIRFAX WEST LAKELAND, FL 33813 D HERNANDEZ, ELIZABETH 5121 FAIRFAX WEST LAKELAND, FL 33813 D HERNANDEZ, ABILIO 5121 FAIRFAX WEST	Trust Fund C	11. ITTLE NAME STREET CITY-SI TITLE NAME STREET CITY-SI TITLE NAME STREET CITY-S TITLE NAME STREET STREET NAME STREET STREET STREET NAME STREET	ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS	Added to Fees	Florida Dep	artment of St DIRECTORS IN Change Change	Addition Addition
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CONTY-ST-ZIP CONTY-ST-ZIP	PSTD HERNANDEZ, OWEN 5121 FAIRFAX WEST LAKELAND, FL 33813 D HERNANDEZ, ELIZABETH 5121 FAIRFAX WEST LAKELAND, FL 33813 D HERNANDEZ, ELIZABETH 5121 FAIRFAX WEST LAKELAND, FL 33813 D HERNANDEZ, ABILIO	Trust Fund C	11. TITLE NAME STREET CITY-SI TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME CITY-S CITY-S CITY-S	ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS 1-ZIP	Added to Fees	Florida Dep	artment of St DIRECTORS IN Change Change Change	Addition Addition
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PSTD HERNANDEZ, OWEN 5121 FAIRFAX WEST LAKELAND, FL 33813 D HERNANDEZ, ELIZABETH 5121 FAIRFAX WEST LAKELAND, FL 33813 D HERNANDEZ, ELIZABETH 5121 FAIRFAX WEST LAKELAND, FL 33813 D HERNANDEZ, ABILIO 5121 FAIRFAX WEST	Trust Fund C	11. ITTLE NAME STREET CITY-SI TITLE NAME STREET CITY-SI TITLE NAME STREET CITY-S TITLE NAME STREET STREET NAME STREET STREET STREET NAME STREET	ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS 1-ZIP P E is:	ADDITIONS/CHANGE	Florida Dep	artment of St DIRECTORS IN Change Change	Addition Addition
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PSTD HERNANDEZ, OWEN 5121 FAIRFAX WEST LAKELAND, FL 33813 D HERNANDEZ, ELIZABETH 5121 FAIRFAX WEST LAKELAND, FL 33813 D HERNANDEZ, ELIZABETH 5121 FAIRFAX WEST LAKELAND, FL 33813 D HERNANDEZ, ABILIO 5121 FAIRFAX WEST	Trust Fund C	11. ITTLE NAME STREET CITY-SI TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET NAME NAME NAME NAME NAME	ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS 1-ZIP D E/IS:	Added to Fees ADDITIONS/CHANGE Sa Hernande To Foir fox hes	Florida Dep	artment of St DIRECTORS IN Change Change Change	Addition Addition
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PSTD HERNANDEZ, OWEN 5121 FAIRFAX WEST LAKELAND, FL 33813 D HERNANDEZ, ELIZABETH 5121 FAIRFAX WEST LAKELAND, FL 33813 D HERNANDEZ, ELIZABETH 5121 FAIRFAX WEST LAKELAND, FL 33813 D HERNANDEZ, ABILIO 5121 FAIRFAX WEST LAKELAND, FL 33813	Trust Fund C	11. ITTLE NAME STREET CITY-SI TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET NAME NAME NAME NAME NAME	ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS 1-ZIP D E/is: ADDRESS 51-ZIP Lake	ADDITIONS/CHANGE	Florida Dep	artment of St DIRECTORS IN Change Change Change	Addition Addition
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE TITLE TITLE	DEFICERS AND DIRECT OFFICERS AND DIRECT OFFICE	Trust Fund C	TITLE NAME STREET CITY-SI TITLE NAME STREET CITY-S TITLE TAME TITLE	ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS 1-ZIP D E/is: ADDRESS 5121 Lake	Added to Fees ADDITIONS/CHANGE Sa Hernande: Fair fox Nes land, FL 33	Florida Dep	artment of St DIRECTORS IN Change Change Change	Addition Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	DEFICERS AND DIRECT OFFICERS AND DIRECT OFFICE	Trust Fund C	TITLE NAME STREET CITY-S'	ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS 1-ZIP D E/IS: ADDRESS 1-ZIP D Cass	Added to Fees ADDITIONS/CHANGE Sa Hernander Fair fox Wes land, FL 33 sandra Herna	Florida Dep STO OFFICERS AND I	artment of St DIRECTORS IN Change Change Change	Addition Addition
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE TITLE TITLE	DEFICERS AND DIRECT OFFICERS AND DIRECT OFFICE	Trust Fund C	TITLE NAME STREET CITY-S'	ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP D E/IS: ADDRESS 5/2/ ADDRESS 5/2 ADDRESS 5/2	Added to Fees ADDITIONS/CHANGE Fair fox Nes land, FL 33 randra Herna 1 Foir fox N	Florida Dep STO OFFICERS AND I	artment of St DIRECTORS IN Change Change Change	Addition Addition
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	DEFICERS AND DIRECT OFFICERS AND DIRECT OFFICE	Trust Fund C	TILE NAME STREET CITY-SI TITLE NAME STREET CITY-SI	ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP D E/IS: ADDRESS 5/2/ ADDRESS 5/2 ADDRESS 5/2	Added to Fees ADDITIONS/CHANGE Sa Hernander Fair fox Wes land, FL 33 sandra Herna	Florida Dep STO OFFICERS AND I	artment of St DIRECTORS IN Change Change Change Change	Addition Addition Addition
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	DEFICERS AND DIRECT OFFICERS AND DIRECT OFFICE	Trust Fund C	ITILE NAME STREET CITY-S' TITLE NAME STREET CITY-S'	ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP D E/IS: ADDRESS 5/2/ ADDRESS 5/2 ADDRESS 5/2	Added to Fees ADDITIONS/CHANGE Fair fox Nes land, FL 33 randra Herna 1 Foir fox N	Florida Dep STO OFFICERS AND I	artment of St DIRECTORS IN Change Change Change	Addition Addition
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	DEFICERS AND DIRECT OFFICERS AND DIRECT OFFICE	Trust Fund C	CONTIDUTION TITLE NAME STREET CITY-S' TITLE NAME NAME NAME NAME	ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP D E/IS: ADDRESS 5/2/ ADDRESS 5/2 ADDRESS 5/2	Added to Fees ADDITIONS/CHANGE Fair fox Nes land, FL 33 randra Herna 1 Foir fox N	Florida Dep STO OFFICERS AND I	artment of St DIRECTORS IN Change Change Change Change	Addition Addition Addition
TO. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	DEFICERS AND DIRECT OFFICERS AND DIRECT OFFICE	Trust Fund C	CONTIDUTION TITLE NAME STREET CITY-S' TITLE NAME NAME NAME NAME	ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS 5121 T-ZIP ADDRESS LAKE 5121 LAKE ADDRESS LAKE ADDRESS	Added to Fees ADDITIONS/CHANGE Fair fox Nes land, FL 33 randra Herna 1 Foir fox N	Florida Dep STO OFFICERS AND I	artment of St DIRECTORS IN Change Change Change Change	Addition Addition Addition

indicated on this report or supplies with airs ming does not quality 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 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 of trustice 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: _

President