

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006409

FILED
Apr 26, 2005
Secretary of State

Entity Name: COMITE CIVICO ECUATORIANO NORTEAMERICANO DE LA FLORIDA CENTRAL INC

Current Principal Place of Business:

136 HARNESS LANE
KISSIMMEE, FL 34743

New Principal Place of Business:

Current Mailing Address:

136 HARNESS LANE
KISSIMMEE, FL 34743

New Mailing Address:

FEI Number: 03-0548893

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RODRIGUEZ, ALDO
4100 BOBBYS CT 201
KISSIMMEE, FL, FL 34741 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: P () Delete
Name: CORONADO, JORGE
Address: 136 HARNESS LANE
City-St-Zip: KISSIMMEE, FL 34743

Title: VP () Delete
Name: AGUINADA, MARCELO
Address: 809 FRUIT WOOD LANE
City-St-Zip: KISSIMMEE, FL 34743

Title: BD () Delete
Name: BARDINELLA, INES
Address: 3248 WINDOVER AVE
City-St-Zip: KISSIMMEE, FL 34741

Title: BD () Delete
Name: LOPEZ, VILMA
Address: 3131 HEMPSTEAD AVE
City-St-Zip: KISSIMMEE, FL 34741

Title: BD () Delete
Name: MARIN, MONICA
Address: 3131 HEMPSTEAD AVE
City-St-Zip: KISSIMMEE, FL 34741

Title: BD () Delete
Name: AVILES, MARTHA
Address: 102 CRESENT CT
City-St-Zip: KISSIMMEE, FL 34758

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

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: JORGE CORONADO

P

04/26/2005

Electronic Signature of Signing Officer or Director

Date