

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

DOCUMENT# N03000006666

**FILED**  
**May 06, 2004**  
**Secretary of State****Entity Name:** ASIA CENTER FOR CULTURE & ARTS OF FLORIDA, INC.**Current Principal Place of Business:**P.O. BOX 453696  
KISSIMMEE, FL 34745**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 453696  
KISSIMMEE, FL 34745**New Mailing Address:****FEI Number:****FEI Number Applied For ( )****FEI Number Not Applicable (X)****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**MONTALLANA, ELSA  
4420 WITHROWWOOD COURT  
KISSIMMEE, FL 32837 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: ( ) Delete  
Name:  
Address:  
City-St-Zip:Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: PD ( ) Change (X) Addition  
Name: CAUSING, RAI PD  
Address: 2447 QUAIL RUN BLVD.  
City-St-Zip: KISSIMMEE, FL 34744 USTitle: VP ( ) Change (X) Addition  
Name: SIMMONS, ROSE VP  
Address: 2101 HICKORY WOOD COURT  
City-St-Zip: ST. CLOUD, FL 34772 USTitle: SEC. ( ) Change (X) Addition  
Name: ALBINO, MAISIE SEC.  
Address: 2746 MUSCATELLO COURT  
City-St-Zip: ORLANDO, FL 32837 USTitle: D ( ) Change (X) Addition  
Name: MONTALLANA, VICTOR P D  
Address: 4420 WITHROWWOOD COURT  
City-St-Zip: ORLANDO, FL 32837 USTitle: D ( ) Change (X) Addition  
Name: MONTALLANA, ELSA O D  
Address: 4420 WITHROWWOOD COURT  
City-St-Zip: ORLANDO, FL 32837 US

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: VICTOR MONTALLANA

D

05/06/2004

Electronic Signature of Signing Officer or Director

Date