2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 04, 2005
Secretary of State

DOCUMENT# N03000006666

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 ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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: PD ( ) Delete
Name: CAUSING, RAI PD
Address: 2447 QUAIL RUN BLVD.
City-St-Zip: KISSIMMEE, FL 34744 US

Title: VP ( ) Delete
Name: SIMMONS, ROSE VP
Address: 2101 HICKORY WOOD COURT
City-St-Zip: ST. CLOUD, FL 34772 US

Title: SEC. ( ) Delete
Name: ALBINO, MAISIE SEC.
Address: 2746 MUSCATELLO COURT
City-St-Zip: ORLANDO, FL 32837 US

Title: D ( ) Delete
Name: MONTALLANA, VICTOR P D
Address: 4420 WITHROWWOOD COURT
City-St-Zip: ORLANDO, FL 32837 US

Title: D ( ) Delete
Name: MONTALLANA, ELSA O D
Address: 4420 WITHROWWOOD COURT
City-St-Zip: ORLANDO, FL 32837 US

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:

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 P. MONTALLANA D 08/04/2005
Electronic Signature of Signing Officer or Director — Date