2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 28, 2004
Secretary of State

DOCUMENT# N03000006733

Entity Name: METRO DADE COMMUNITY DEVELOPMENT CORPORATION, INC.

Current Principal Place of Business:

19615 SW 127TH COURT
MIAMI, FL 33177

New Principal Place of Business:

Current Mailing Address:

19615 SW 127TH COURT
MIAMI, FL 33177

New Mailing Address:

FEI Number: 73-1676027 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PEREZ, MAGDA I
19615 SW 127TH COURT
MIAMI, FL 33177

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: PEREZ, MAGDA I
Address: 19615 SW 127TH COURT
City-St-Zip: MIAMI, FL 33177

Title: VD ( ) Delete
Name: PAVON, WILFREDO R
Address: 824 W. PALM DRIVE
City-St-Zip: FLORIDA CITY, FL 33034

Title: VD ( ) Delete
Name: CORDERO, EDWIN DR.
Address: 17440 S.W. 296TH ST.
City-St-Zip: HOMESTEAD, FL 33030

Title: STD ( ) Delete
Name: TORRES, CARLOS
Address: 15745 SW 303RD TERRACE
City-St-Zip: HOMESTEAD, FL 33033

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:

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: MAGDA PEREZ PD 03/28/2004

Electronic Signature of Signing Officer or Director — Date