2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007762

Entity Name: COMPARTIENDO CON CRISTO, INC.

US

FILED Feb 16, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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1160 S.W. 1ST STREET MIAMI, FL 33130

Current Mailing Address: New Mailing Address:

580 W 12TH PLACE HIALEAH, FL 33010

FEI Number: 56-2336425 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LANDA, MERCEDES 580 W 12TH PL HIALEAH, FL 33010

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete LANDA, MERCEDES Name: 580 W 12TH PL Address: City-St-Zip: HIALEAH, FL 33010

Title: () Delete DAGNESES, ISREAL Name: Address: 2244 SW 9TH ST APT 8 City-St-Zip: MIAMI, FL 33135

Title: () Delete BLANCO, GENOVEVA Name: 6101 SW 19TH ST Address: City-St-Zip: MIAMI, FL 33155

Title: () Delete MARTINEZ, YAMILE Name: Address: 3750 S.W. 19TH STREET City-St-Zip: MIAMI, FL 33155

Title: () Delete PEREZ, NANCY Name: 580 W. 12TH PLACE Address: City-St-Zip: HIALEAH, FL 33010

Title: (X) Delete QUEVEDO, RENE Name: Address: 3730 S.W. 72ND AVENUE MIAMI, FL 33155 City-St-Zip:

(X) Change () Addition

LANDA, MERCEDES Name: Address: 580 W 12TH PL City-St-Zip: HIALEAH, FL 33010

Title: (X) Change () Addition

Name: DIFFEL, LEONARDO S Address: 580 W. 12TH PLACE City-St-Zip: HIALEAH, FL 33010

Title: T/D (X) Change () Addition

Name: PEREZ, NANCY Address: 580 WEST 12TH PLACE City-St-Zip: HIALEAH, FL 33010

Title: S/D (X) Change () Addition

Name: MARTINEZ, YAMILE Address: 3750 S.W. 19TH STREET City-St-Zip: MIAMI, FL 33155

Title: (X) Change () Addition

QUEVO, RENE Name:

3730 S.W. 72ND AVENUE Address:

City-St-Zip: MIAMI, FL 33155

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 Chapter 119, 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: MERCEDES LANDA P/D 02/16/2006