

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010027

FILED
May 01, 2006
Secretary of State

Entity Name: CENTRO CRISTIANO VIDA - LIFE CHIRSTIAN CENTER, INC.

Current Principal Place of Business:

12725 SW 50 STREET
MIRAMAR, FL 33027

New Principal Place of Business:

4105 SE 52ND CT
OCALA, FL 34480

Current Mailing Address:

12725 SW 50 STREET
MIRAMAR, FL 33027

New Mailing Address:

4105 SE 52ND CT
OCALA, FL 34480

FEI Number: 90-0154458 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **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:

LORENZO, BENJAMIN
9766 NW 127 TERRACE
HIALEAH, FL 33018 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: LOPEZ, ROBERTO A
Address: 12725 SW 50 ST
City-St-Zip: MIRAMAR, FL 33027

Title: S () Delete
Name: LORENZO, LOYDA
Address: 9766 NW 127 TERRACE
City-St-Zip: HIALEAH, FL 33018

Title: TD () Delete
Name: CASTELLANOS, ILEANA
Address: 7038 W 29 WAY
City-St-Zip: HIALEAH, FL 33018

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LOPEZ, ROBERTO A
Address: 4105 SE 52ND CT
City-St-Zip: OCALA, FL 34480

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 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: ROBERTO A. LOPEZ

REV.

05/01/2006

Electronic Signature of Signing Officer or Director

Date