


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2005 8:00 am
Secretary of State

04-25-2005 90304 019 ****61.25

DOCUMENT # N03000011014

1. Entity Name
 LA CASA DE FE INTERNACIONAL, INC.



Principal Place of Business
~~1703 DESTINY BLVD~~
~~SUITE 201~~
~~KISSIMMEE, FL 34741~~

Mailing Address
 1703 DESTINY BLVD
 SUITE 201
 KISSIMMEE, FL 34741

J0043303

2. Principal Place of Business
 12250 GRECO DRIVE
 Suite, Apt. #, etc.

3. Mailing Address
 12250 GRECO DRIVE
 Suite, Apt. #, etc.



03232005 Chg-NP CR2E037 (10/03)

City & State
 ORLANDO, FLORIDA

City & State
 ORLANDO, FLORIDA

Zip
 32824

Country
 ORANGE

4. FEI Number
 20-0527021

Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 BANOS, FREDDY
 1703 DESTINY BLVD
 SUITE 201
 KISSIMMEE, FL 34741

7. Name and Address of New Registered Agent
 Name
 Freddy BANOS
 Street Address (P.O. Box Number is Not Acceptable)
 12250 GRECO DRIVE
 City
 ORLANDO FL Zip Code
 32824

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE  DATE 3/24/05

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25
Due by May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BANOS, FREDDY 1703 DESTINY BLVD, SUITE 201 KISSIMMEE, FL 34741	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D Freddy BANOS 12250 GRECO DRIVE ORLANDO, FL 32824	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  DATE 3/23/05 DAYTIME PHONE # 407-855-8023

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR