

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 28, 2006 8:00 am
Secretary of State

03-28-2006 90123 033 ****70.00

DOCUMENT # N03000011014					
1. Entity Name LA CASA DE FE INTERNACIONAL, INC.					
Principal Place of Business 12250 GRECO DRIVE ORLANDO, FL 32824			Mailing Address 12250 GRECO DRIVE ORLANDO, FL 32824		
2. Principal Place of Business <i>7575 Kingspointe Parkway</i>		3. Mailing Address <i>7575 Kingspointe Parkway</i>			
Suite, Apt. #, etc. <i>#11</i>		Suite, Apt. #, etc. <i>#11</i>		02182006 Chg-NP CR2E037 (11/05)	
City & State <i>Orlando, FL.</i>		City & State <i>Orlando, FL.</i>		4. FEI Number 20-0527021	
Zip <i>32819</i>		Zip <i>32819</i>		Country <i>ORANGE</i>	
Country <i>ORANGE</i>		Country <i>ORANGE</i>		5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BANOS, FREDDY 12250 GRECO DRIVE ORLANDO, FL 32824				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 <i>[Signature]</i>					
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
Filing Fee is \$61.25 Due by May 1, 2006		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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BANOS, FREDDY 12250 GRECO DRIVE ORLANDO, FL 32824	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V.P. BANOS BANNY 12250 GRECO DRIVE ORLANDO, FL 32824	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY LUGO YVETTE 8679 ABBATS BURY DR. WINDEEMERE, FL 34786	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER BANOS Federico L. 3830 POWHINE Circle #103 MIAMI FL 33174	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director GUZMAN Robert. 12944 GLEASON WAY CLERMONT, FL 34711	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <i>[Signature]</i>					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
Date Daytime Phone #					