

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005681

FILED
Jul 05, 2007
Secretary of State

Entity Name: CENTRO L.E.A. INC.

Current Principal Place of Business:

3301 WEST OAK ST.
KISSIMMEE, FL 34744 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 450278
KISSIMMEE, FL 34745 US

New Mailing Address:

FEI Number: 20-1335249 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:

OVERSTREET, REBECCA
3301 WEST OAK ST.
KISSIMMEE, FL 34744 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: P () Delete
Name: OVERSTREET, REBECCA
Address: 3301 WEST OAK ST.
City-St-Zip: KISSIMMEE, FL 34744 US

Title: VP () Delete
Name: GARCIA, CESAR
Address: 3301 WEST OAK ST.
City-St-Zip: KISSIMMEE, FL 34744 US

Title: EX S () Delete
Name: SANTIAGO, ARTURO
Address: 3391 MARSHFIELD RESERVE
City-St-Zip: KISSIMMEE, FL 34746 US

Title: T () Delete
Name: MERCADO, CARMEN
Address: 2406 WINDING RIDGE, SO.
City-St-Zip: KISSIMMEE, FL 34741 US

Title: V () Delete
Name: DAVILA, MIRIAM
Address: 12782 MARJERAMA DRIVE
City-St-Zip: ORLANDO, FL 32837 US

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:

Title: V (X) Change () Addition
Name: DAVILA, MIRIAM
Address: 12782 MARJORAMA DRIVE
City-St-Zip: ORLANDO, FL 32837 US

I hereby certify that the information supplied with this filing does not qualify 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: OVERSTREET, REBECCA

P

07/05/2007

Electronic Signature of Signing Officer or Director

_____ Date