## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000008683

Apr 28, 2006 Secretary of State

Entity Name: CENTRO DE ALABANZA Y RESTAURACION INC.

**Current Principal Place of Business: New Principal Place of Business:** 

3600 MC NEIL RD APOPKA, FL 32703

**Current Mailing Address: New Mailing Address:** 

3600 MC NEIL RD APOPKA, FL 32703

FEI Number: 72-1589859 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:

RAMOS, ABNER 3600 MĆ NEIL RD APOPKA, FL 32703

US

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

## **OFFICERS AND DIRECTORS:**

(X) Change ( ) Addition

() Delete RAMOS, ABNER RAMOS, ABNER Name: Name: 8517 MILANO DR APT 1920 Address: 433 OPAL CT Address:

City-St-Zip: ORLANDO, FL 32810 City-St-Zip: ALTAMONTE SPNG, FL 32714

Title: VD () Delete Title: VD (X) Change ( ) Addition RAMOS, YASMIN Name: RAMOS, YASMIN Name:

Address: 8517 MILANO DR APT 1920 Address: 433 OPAL CT City-St-Zip: ORLANDO, FL 32810 City-St-Zip: ALTAMONTE SPNG, FL 32714

Title: () Delete Title: (X) Change ( ) Addition

CANCEL, FERDINAND CANCEL, FERDINAND Name: Name: 880 WESLEY CR APT 208 Address: Address: 433 OPAL CT

City-St-Zip: APOPKA, FL 32703 City-St-Zip: ALTAMONTE SPNG, FL 32714

Title: ( ) Delete Title: (X) Change ( ) Addition

MARTINEZ, YURIDIA Name: Name: MARTINEZ, YURIDIA Address: 880 WESLEY CIR APT 208 Address: 433 OPAL CT

City-St-Zip: APOPKA, FL 32703 City-St-Zip: ALTAMONTE SPNG, FL 32714

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: ABNER RAMOS PD 04/28/2006