

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008683

FILED
Jan 05, 2012
Secretary of State

Entity Name: CENTRO DE ALABANZA Y RESTAURACION INC.

Current Principal Place of Business:

360 NORTH STATE RD 434
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

Current Mailing Address:

360 NORTH STATE RD 434
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

FEI Number: 72-1589859

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ABNER, RAMOS
360 NORTH ST RD 434
ALTAMONTE SPRINGS, FL 32714 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
Name: RAMOS, ABNER
Address: 433 OPAL CT
City-St-Zip: ALTAMONTE SPNG, FL 32714

Title: VD
Name: RAMOS, YASMIN
Address: 433 OPAL CT
City-St-Zip: ALTAMONTE SPNG, FL 32714

Title: TD
Name: JOSE, MARTINEZ
Address: 301 FEATHER PLACE
City-St-Zip: LONGWOOD, FL 32779

Title: S
Name: ACEVEDO, EFRAIN
Address: 1667 TREMONT LANE
City-St-Zip: WINTER PARK, FL 32792

Title: AP
Name: LUIS, POMALES
Address: 312 FEATHER PLACE
City-St-Zip: LONGWOOD, FL 32779

I hereby 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 all other like empowered.

SIGNATURE: ABNER RAMOS

PD

01/05/2012

Electronic Signature of Signing Officer or Director

Date