

**2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Oct 03, 2005**  
**Secretary of State**

DOCUMENT# N04000010615

**Entity Name:** CONGREGACION KENSINGTON SPANISH, INC.**Current Principal Place of Business:**1450 SW 24 AVE.  
MIAMI, FL 33145**New Principal Place of Business:****Current Mailing Address:**1450 SW 24 AVE.  
MIAMI, FL 33145**New Mailing Address:****FEI Number:** 32-0132114**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**SANTOS, MARIO  
4480 SW 10 STREET  
MIAMI, FL 33134 US**Name and Address of New Registered Agent:**SILVA, ENRIQUE  
3352 NW 15 ST  
MIAMI, FL 33125 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: ENRIQUE SILVA

10/03/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: SANTOS, MARIO  
Address: 4480 SW 10 STREET  
City-St-Zip: MIAMI, FL 33134

Title: DS ( ) Delete  
Name: QUINTANA, GABRIEL  
Address: 4640 SW 14 STREET  
City-St-Zip: MIAMI, FL 33134

Title: DT ( ) Delete  
Name: SILVA, ENRIQUE  
Address: 3352 NW 15 STREET  
City-St-Zip: MIAMI, FL 33125

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP (X) Change ( ) Addition  
Name: SILVA, ENRIQUE  
Address: 3352 NW 15 ST  
City-St-Zip: MIAMI, FL 33125

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DT (X) Change ( ) Addition  
Name: QUINONEZ, ROBERTO  
Address: 18853 NW 77 CT  
City-St-Zip: MIAMI, FL

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ENRIQUE SILVA

DP

10/03/2005

Electronic Signature of Signing Officer or Director

Date