

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011806

FILED  
Jan 12, 2007  
Secretary of State

**Entity Name:** ORGANIZACION CRISTIANA AMOR VIVIENTE DE FLORIDA, INC.

**Current Principal Place of Business:**

3400 SW 153RD AVENUE  
MIAMI, FL 33185

**New Principal Place of Business:**

**Current Mailing Address:**

3400 SW 153RD AVENUE  
MIAMI, FL 33185

**New Mailing Address:**

**FEI Number:** 20-2094017

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SOLORZANO, OSCAR  
3400 SW 153RD AVENUE  
MIAMI, FL 33185 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: DP ( ) Delete  
Name: SOLORZANO, OSCAR  
Address: 3400 SW 153RD AVENUE  
City-St-Zip: MIAMI, FL 33185

Title: VPD ( ) Delete  
Name: BERNHARD, GUSTAVO  
Address: 2417 QUAIL COVE CT.  
City-St-Zip: KISSIMMEE, FL 33749

Title: TSD ( ) Delete  
Name: CALLEJAS, GABRIEL  
Address: 6010 WOODLAND POINT DRIVE  
City-St-Zip: TAMARAC, FL 33319

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

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

Title: VPD (X) Change ( ) Addition  
Name: ARIAS, JOSE A VP  
Address: 355 NW 109 AVENUE UNIT 611  
City-St-Zip: MIAMI, FL 33172

Title: TSD (X) Change ( ) Addition  
Name: RIVERA, RAMON R T  
Address: 2275 W 55 STREET  
City-St-Zip: HIALEAH, FL 33016

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: OSCAR SOLORZANO

P

01/12/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date