

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011806

FILED
Aug 08, 2008
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:

14935 SW 23 LANE
MIAMI, FL 33185

Current Mailing Address:

3400 SW 153RD AVENUE
MIAMI, FL 33185

New Mailing Address:

14935 SW 23 LANE
MIAMI, FL 33185

FEI Number: 20-2094017 **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:

SOLORZANO, OSCAR
3400 SW 153RD AVENUE
MIAMI, FL 33185 US

Name and Address of New Registered Agent:

SOLORZANO, OSCAR
14935 SW 23 LANE
MIAMI, FL 33185 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: OSCAR SOLORZANO

08/08/2008

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: ARIAS, JOSE A VP
Address: 355 NW 109 AVENUE UNIT 611
City-St-Zip: MIAMI, FL 33172

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

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: SOLORZANO, OSCAR
Address: 14935 SW 23 LANE
City-St-Zip: MIAMI, FL 33185

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

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

Title: SD () Change (X) Addition
Name: CAROL, GONZALEZ C S
Address: 80 NW 124 ST
City-St-Zip: MIAMI, FL 33168

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: OSCAR SOLORZANO

PD

08/08/2008

Electronic Signature of Signing Officer or Director

Date