

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002101

FILED
Jan 22, 2006
Secretary of State

Entity Name: COMPARTIENDO CRISTO CON LAS GENTES INC.

Current Principal Place of Business:

1712 WINDERMERE WAY
TAMPA, FL 33619

New Principal Place of Business:

Current Mailing Address:

1712 WINDERMERE WAY
TAMPA, FL 33619

New Mailing Address:

FEI Number: 14-1924535

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LUGO, ANDRES A
1712 WINDERMERE WAY
TAMPA, FL 33619 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 () Delete
Name: LUGO, ANDRES A
Address: 1712 WINDERMERE WAY
City-St-Zip: TAMPA, FL 33619

Title: TD () Delete
Name: CORA, LIDIA
Address: 1101 FERLITA WAY
City-St-Zip: TAMPA, FL 33619

Title: SD () Delete
Name: MARTINEZ, YOMARIZ
Address: 11403 IVY FLOWER LOOP
City-St-Zip: RIVERVIEW, FL 33569

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: ANDRES A. LUGO

MR

01/22/2006

Electronic Signature of Signing Officer or Director

Date