

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009804

FILED
Apr 30, 2008
Secretary of State

Entity Name: ASSOCIATION CRISTIANO INTERNATIONAL, INC.

Current Principal Place of Business:

610 NE 177TH STREET
NORTH MIAMI, FL 33162

New Principal Place of Business:

9770 S.W. 14TH COURT
PEMBROKE PINES, FL 33025

Current Mailing Address:

610 NE 177TH STREET
NORTH MIAMI, FL 33162

New Mailing Address:

9770 S.W. 14TH COURT
PEMBROKE PINES, FL 33025

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ISMA, JOEL
610 NE 177TH STREET
NORTH MIAMI, FL 33162 US

Name and Address of New Registered Agent:

ISMA, JOEL
9770 S.W. 14TH COURT
PEMBROKE PINES, FL 33025 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: JOEL ISMA

04/30/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: NICHOLAS, JUAN A REV.
Address: 610 NE 177TH STREET
City-St-Zip: NORTH MIAMI, FL 33162

Title: SD () Delete
Name: BELIZAIRE, BOAZ REV.
Address: 610 NE 177TH STREET
City-St-Zip: NORTH MIAMI, FL 33162

Title: VD () Delete
Name: ISMA, JOEL
Address: 610 NE 177TH STREET
City-St-Zip: NORTH MIAMI, FL 33162

Title: D () Delete
Name: BAPTISTIE, ALEXANDE J
Address: 610 NE 177TH STREET
City-St-Zip: NORTH MIAMI, FL 33162

Title: D () Delete
Name: PIERRE, GORVY
Address: 610 NE 177TH STREET
City-St-Zip: NORTH MIAMI, FL 33162

Title: SD () Delete
Name: PEREZ, DEOLIMA
Address: 610 NE 177TH STREET
City-St-Zip: NORTH MIAMI, FL 33162

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VD (X) Change () Addition
Name: ISMA, JOEL
Address: 9770 S.W. 14TH COURT
City-St-Zip: PEMBROKE PINES, FL 33025

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 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: JOEL ISMA

VD

04/30/2008

Electronic Signature of Signing Officer or Director

Date