## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000010128

Entity Name: CROWN OF GRACE, INC.

FILED Mar 30, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

14981 SOUTHWEST 17TH LANE MIAMI, FL 33185

Current Mailing Address: New Mailing Address:

14981 SOUTHWEST 17TH LANE MIAMI, FL 33185

FEI Number: 20-3561165 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

SPIEGEL & UTRERA, P.A.

1840 SW 22ND ST.

4TH FLOOR

MIAMI, FL 33145 US

LUCIANO, MIRELLA
14981 SW 17 LANE
MIAMI, FL 33185

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: MIRELLA LUCIANO 03/30/2006

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PD () Delete Title: PRES (X) Change () Addition

Name: LUCIANO, EDWARD Name: LUCIANO, EDWARD
Address: 14981 SOUTHWEST 17TH LANE Address: 14981 SOUTHWEST 17TH LANE

City-St-Zip: MIAMI, FL 33185 City-St-Zip: MIAMI, FL 33185

Title: VSTD ( ) Delete Title: VP (X) Change ( ) Addition

Name: LUCIANO, MIRELLA Name: LUCIANO, MIRELLA

Address: 14981 SOUTHWEST 17TH LANE

Address: 14981 SOUTHWEST 17TH LANE

City-St-Zip: MIAMI, FL 33185 City-St-Zip: MIAMI, FL 33185

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 DIEZ, MIRELLA
 Name:

 Address:
 14981 SOUTHWEST 17TH LANE
 Address:

 City-St-Zip:
 MIAMI, FL 33185
 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: MIRELLA LUCIANO VP 03/30/2006