2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Mar 15, 2007 8:00 am
Secretary of State
02-23-2007 90029 016 ****70.00

DOCUMENT # N06000005433

1. Entity Name
TEMPLO DE LA ALBANZA DE WEST PALM BEACH, INC.

Principal Place of Business	Mailing Address
182 WOODLAND RD PALM SPRINGS, FL 33461	182 WOODLAND RD PALM SPRINGS, FL 33461

01052007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
5984 Coconut Drive	5984 Coconut Dr
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: West Palm Beach	City & State: West Palm Beach
Zip: 33413 Country: USA	Zip: 33413 Country: USA

4. FEI Number: 20-4910586 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
VEGA, LUIS 182 WOODLAND RD PALM SPRINGS, FL 33461	Name Street Address (P.O. Box Number is Not Acceptable) 5984 Coconut Drive City: West Palm Beach FL Zip Code: 33413

8. 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. I am familiar with, and accept the obligations of registered agent.

Firma Luis

SIGNATURE: Luis Vega

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP VEGA, LUIS 182 WOODLAND RD PALM SPRINGS, FL 33461	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary Ruth Esquilin	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD CORONADO, TOMASINA A 182 WOODLAND RD PALM SPRINGS, FL 33461	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Treasurer Jose Rosa	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD ESQUILIN, JOSE 5984 COCONUT DR WEST PALM BEACH, FL 33413	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD ALFARO, OLIVER 528 HANTON DR WEST PALM BEACH, FL 33405	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Jose E. Esquilin 3-8-07 561-721-1422

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #