## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000012150

FILED Mar 19, 2012 Secretary of State

Entity Name: CENTRO MATER CHILD CARE SERVICES, INC.

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

8298 NW 103 ST.

HIALEAH GARDENS, FL 33016

Current Mailing Address: New Mailing Address:

4790 NORTH STATE ROAD 7 LAUDERDALE LAKES, FL 33319

FEI Number: 20-8083301 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

J. PATRICK FITZGERALD, ESQUIRE 110 MERRICK WAY SUITE 3-B CORAL GABLES, FL 33134 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: CD

 Name:
 LAWSON, RALPH E

 Address:
 6855 RED ROAD #600

 City-St-Zip:
 CORAL GABLES, FL 33143

Title:

Name: JAMAL, ASIF

Address: 1028 COTORRO AVENUE City-St-Zip: CORAL GABLES, FL 33146

Title: VCSD

Name: WORLEY, ELIZABETH A

Address: C/O 9401 BISCAYNE BOULEVARD

City-St-Zip: MIAMI SHORES, FL 33138

Title:

Name: FARREY, BUD MR. Address: 1315 BAY TERRACE

City-St-Zip: NORTH BAY VILLAGE, FL 33141

Title: PCEO

Name: CATANIA, JOSEPH M

Address: C/O 4790 NORTH STATE ROAD 7 City-St-Zip: LAUDERDALE LAKES, FL 33319

Title: AS

Name: MARIN, TOMAS

Address: C/O 5400 S.W. 102 AVENUE

City-St-Zip: MIAMI, FL 33165

I hereby 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 all other like empowered.

SIGNATURE: JOSEPH M. CATANIA PCEO 03/19/2012