2004 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mar 26, 2004 8:00 am Secretary of State DOCUMENT # N22776 03-26-2004 90011 048 ****61.25 KARDECIAN ESPIRITISM FEDERATION OF FLORIDA **INCORPORATED** Principal Place of Business Mailing Address 54022653 P.O. BOX 410892 /6 2426 MIAMI, FL 33314 US 6450 NW 77 CT, 2DO. PISO MIAMI, FL 33166 US 33116/2426 2. Principal Place of Business 3. Mailing Address POBOX Suite, Apt. #, etc. 02112004 Chg-NP CR2E037 (10/03) 4. FEI Number 65-0034375 City & State City & State Applied For Not Applicable Miami Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired DADE 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MARIA ISABEL PUERTO PENA, ANA E Street Address (P.O. Box Number is Not Acceptable) 13772 SW 149 CIRCLE LANE MIAMI, FL 33186 660 N.W. 124 PLACE 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. SIGNATURE A Make check payable to Filing Fee is \$61.25 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Florida Department of State Added to Fees Due by May 1, 2004 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. ☐ Addition TITLE Change Delete TITLE PUERTO, MARIA ISABEL NAME PENA, ANA E NAME 660 NW 124 PLACE Minori Florida 35186 13772 SW 149 CIRCLE LANE STREET ADDRESS STREET ADDRESS MIAMI, FL 33186 CITY-ST-ZIP CITY-ST-7IP Delete TITLE TITLE DE ESPIRITU SANTO DECIO 1500 E. ATLANTIC BLVd. RODRIGUEZ, HAYDEE NAME NAME 1150 NE 137TH STREET STREET ADDRESS STREET ADDRESS POMPAND BEACH FL. 33060 CITY-ST-ZIP MIAMI, FL 33161 CITY-ST-ZIP Change ☐ Addition Delete TITLE TITLE FELDSTEIN, IVANY 13911 S.W. 100 LANE PEREZ, MARIA ANICIA NAME NAME STREET ADDRESS STREET ADDRESS 7707 SW 86TH STREET #105-B miam: FL 33186 MIAMI, FL 33143 CITY-ST-ZIP CITY-ST-ZIP TD Delete TITLE Change TITLE OLIVA, RAQUEL 11021 SW 142 CT SANTOS, CHRISTOPHER NAME NAME STREET ADDRESS 5265 NW 112TH AVE #108 STREET ADDRESS MIAMI, FL 33186 CITY-ST-ZIP MIAMI, FL 33178 CITY-ST-ZIP (X) Change Delete ☐ Addition TITLE TITLE ULFE, MANUEL NAME BANCHON, FERNANDO NAME 9900 E. CALUSA DRIVE **12956 NW 10TH STREET** STREET ADDRESS STREET ADDRESS MIAMI, FL 33182 CITY-ST-7IP CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE TITLE SILVA, MARLENY NAME NAME STREET ADDRESS 8850 SW 72 ST #G-145 STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP MIAMI, FL 33173 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

FILED

Daytime Phone #