

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36564

Entity Name: LA SAGRADA FAMILIA, INC.

FILED  
Sep 07, 2004  
Secretary of State

**Current Principal Place of Business:**

113-06 157 STREET  
JAMAICA, NY 11435

**New Principal Place of Business:**

**Current Mailing Address:**

113-06 157 STREET  
JAMAICA, NY 11435

**New Mailing Address:**

107-23 71ST RD  
140  
FOREST HILLS, NY 11375 US

FEI Number: 59-2995575

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SMITH, DELSA M  
5951 ELMHURST ROAD  
WEST PALM BEACH, FL 33417 US

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

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: PD ( ) Delete  
Name: CERVANTES, ERNESTO,  
Address: 113-06 157 STREET  
City-St-Zip: JAMAICA, NY 11435

Title: VD ( ) Delete  
Name: CERVANTE, LUZ C  
Address: 113-06 157 STREET  
City-St-Zip: JAMAICA, NY 11435

Title: TD ( ) Delete  
Name: PERALTA, MARGARITA  
Address: 116 BELLANCA LN.  
City-St-Zip: NEW CASTLE, DE 19720

Title: S ( ) Delete  
Name: PERALTA, VINICIO Y  
Address: 116 BELLANCA LN.  
City-St-Zip: NEW CASTLE, DE 19720

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: CERVANTES, ERNESTO  
Address: 113-06 157 STREET  
City-St-Zip: JAMAICA, NY 11435

Title: VD (X) Change ( ) Addition  
Name: CERVANTES, LUZ C  
Address: 113-06 157 STREET  
City-St-Zip: JAMAICA, NY 11435

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 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 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: ERNESTO CERVANTES

PD

09/07/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date