

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43943

FILED  
Apr 27, 2007  
Secretary of State

Entity Name: COMUNIDAD CRISTIANA CARIS, INC.

**Current Principal Place of Business:**

12200 S.W. 129 CT  
MIAMI, FL 33186 US

**New Principal Place of Business:**

**Current Mailing Address:**

12200 S.W. 129 CT  
MIAMI, FL 33186 US

**New Mailing Address:**

FEI Number: 65-0418847      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

ESPINAL, ELKIN DIR  
2955 NE 41 RD.  
HOMESTEAD, FL 33030 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: MD ( ) Delete  
Name: ESPINAL, SOLANDRY MNG DIR  
Address: 2955 NE 41 RD.  
City-St-Zip: HOMESTEAD, FL 33030 US

Title: DSP ( ) Delete  
Name: ESPINAL, ELKIN DIR  
Address: 2955 NE 41 RD.  
City-St-Zip: HOMESTEAD, FL 33030 US

Title: C ( ) Delete  
Name: LOPEZ, VIVIANA CHAIRMA  
Address: 16413 SW 84TH. STREET  
City-St-Zip: MIAMI, FL 33193 US

Title: T (X) Delete  
Name: LOPEZ, HERMAN TREASUR  
Address: 16413 SW 84TH. STREET  
City-St-Zip: MIAMI, FL 33193 US

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

Title: V (X) Change ( ) Addition  
Name: ESPINAL, SOLANDRY VICE P.  
Address: 2955 NE 41 RD.  
City-St-Zip: HOMESTEAD, FL 33030 US

Title: PD (X) Change ( ) Addition  
Name: ESPINAL, ELKIN P. DIR  
Address: 2955 NE 41 RD.  
City-St-Zip: HOMESTEAD, FL 33030 US

Title: ST (X) Change ( ) Addition  
Name: CORTES, MARTHA I SEC.TRE  
Address: 11246 SW 159 AVE.  
City-St-Zip: MIAMI, FL 33196

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: ELKIN ESPINAL

PD

04/27/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date