

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N45642

FILED
May 02, 2006
Secretary of State

Entity Name: CONGREGACION MITA DE FLORIDA, INC.

Current Principal Place of Business:

200 WEST LANCASTER RD.
ORLANDO, FL 32809

New Principal Place of Business:

Current Mailing Address:

200 WEST LANCASTER RD.
ORLANDO, FL 32809

New Mailing Address:

FEI Number: 59-3092641 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SOTO, ISMAEL
304 W. LANCASTER ROAD., SIDE B
ORLANDO, FL 32809 US

Name and Address of New Registered Agent:

SOTO, ISMAEL
6417 SHERYL ANN DR
ORLANDO, FL 32809 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: _____

05/02/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: VERA, DAVID A
Address: 11161 LAXTON ST
City-St-Zip: ORLANDO, FL 32824

Title: PD () Delete
Name: SOTO, ISMAEL
Address: 304 W. LANCASTER RD SIDE B
City-St-Zip: ORLANDO, FL 32809

Title: SD () Delete
Name: VELASCO, MARTA Y
Address: 531 LEAR ST
City-St-Zip: ORLANDO, FL 32809

Title: TD () Delete
Name: RIVERA, JUANITA
Address: 1202 WAKULLA WAY
City-St-Zip: ORLANDO, FL 32839

Title: D () Delete
Name: ORTIZ, ELDA SARA
Address: 116 W BUCHANON AVE
City-St-Zip: ORLANDO, FL 32809

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PD (X) Change () Addition
Name: SOTO, ISMAEL
Address: 6417 SHERYL ANN DR
City-St-Zip: ORLANDO, FL 32809

Title: SD (X) Change () Addition
Name: QUIÑONEZ, VIRGINIA
Address: 13034 ISLAND BREEZE
City-St-Zip: ORLANDO, FL 32824

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 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: ISMAEL SOTO

PD

05/02/2006

Electronic Signature of Signing Officer or Director

Date