

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48327

FILED  
Apr 28, 2006  
Secretary of State

Entity Name: DE HOSTOS SENIOR CENTER INC.

**Current Principal Place of Business:**

2902 NW 2ND AVE.  
MIAMI, FL 33127

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 370793  
MIAMI, FL 33137

**New Mailing Address:**

FEI Number: 65-0343402

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FENTE, MANUEL F ATTY  
1110 BRICKELL AVE 7TH FLR  
MIAMI, FL 33131 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: DVC ( ) Delete  
Name: VEGA, JOSE  
Address: 25 SE 2ND AVE., STE 410  
City-St-Zip: MIAMI, FL 33128

Title: DP ( ) Delete  
Name: BELTRAN, LUIS  
Address: 1660 NW 15 ST. RD., APT 4  
City-St-Zip: MIAMI, FL 33125

Title: DT ( ) Delete  
Name: ROMAN, DANIEL  
Address: 15925 SW 103 LN  
City-St-Zip: MIAMI, FL 33196

Title: CEO ( ) Delete  
Name: COUVERTIER, ESTHER  
Address: 600 NE 36TH STREET #1007  
City-St-Zip: MIAMI, FL 33137

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

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

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

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: ESTHER COUVERTIER

CEO

04/28/2006

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

\_\_\_\_\_  
Date