


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 04, 2005 08:00 AM
Secretary of State

DOCUMENT # N50927	
1. Entity Name CONCERNED CITIZENS OF WEST DADE, INC.	

Principal Place of Business 13391 SOUTHWEST 26TH TERRACE MIAMI FL 33175	Mailing Address 13391 SOUTHWEST 26TH TERRACE MIAMI FL 33175
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State	City & State
Zip	Country



1st MOORE CR2E037 (10/04)

4. FEI Number NO-T APPLICABLE	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent MATOS, GABRIEL 13391 S.W. 26TH TERRACE MIAMI FL 33175

7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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	Signature, typed or printed name of registered agent and title if applicable	(NOTE: Registered Agent signature required when reinstating)	DATE
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FILE NOW: FEE IS \$61.25 Due By May 1, 2005	9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE	P <input type="checkbox"/> Delete
NAME	MATOS, GABRIEL
STREET ADDRESS	13391 SW 26TH TERR.
CITY- ST- ZIP	MIAMI FL 33175
TITLE	VP <input type="checkbox"/> Delete
NAME	CASTRO, FULGRNCIO
STREET ADDRESS	2430 SW 127TH CT
CITY- ST- ZIP	MIAMI FL 33175
TITLE	T <input type="checkbox"/> Delete
NAME	FELIPE, LUIS
STREET ADDRESS	2811 SW 137TH CT.
CITY- ST- ZIP	MIAMI FL 33175
TITLE	S <input type="checkbox"/> Delete
NAME	SANTOYO, GUADALUPE
STREET ADDRESS	2959 SW 134TH AVE
CITY- ST- ZIP	MIAMI FL 33175
TITLE	D <input type="checkbox"/> Delete
NAME	FERNANDEZ, MANUEL
STREET ADDRESS	12940 SW 21ST ST
CITY- ST- ZIP	MIAMI FL 33175
TITLE	D <input type="checkbox"/> Delete
NAME	VINCENTE, MARIANA
STREET ADDRESS	13341 S.W. 26TH TERRACE
CITY- ST- ZIP	MIAMI FL 33179

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

000000286710
04/04/05-80040-006 61.25

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.

SIGNATURE:		4/1/05	305-554-6560
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	Daytime Phone #