2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000002229

Apr 30, 2006 Secretary of State

Entity Name: CENTRO CULTURAL LATINOAMERICANO INC.

Current Principal Place of Business: New Principal Place of Business: 3405 FOREST HILL BLVD. 6200 S. DIXIE HWY. WEST PALM BEACH, FL 33406 WEST PALM BEACH, FL 33405 **Current Mailing Address: New Mailing Address:** PO BOX 6474 LAKE WORTH, FL 334666474 FEI Number: 65-0579660 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CENTER FOR MINORITY HUMAN SERVICES PROVIDERS INC., %ELSA GIBBONS 301 BROADWAY, SUITE 300 RIVIERA BEACH, FL 33404 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition SURI, LEAH RENDON, JOSE Name: Name: 7963 NAUTICA WAY Address: 6200 S. DIXIE HWY Address: City-St-Zip: LAKE WORTH, FL 33467 City-St-Zip: WEST PALM BEACH, FL 33405 Title: () Delete Title: () Change () Addition MORE, JR., FRANK Name: Name: Address: 3919 VICTORIA DRIVE Address: City-St-Zip: WEST PALM BEACH, FL City-St-Zip: Title: () Delete Title: (X) Change () Addition CARDEC, MABEL Name: LEYVA, FERNANDO Name: 6523 SPRING MEADOW DRIVE Address: Address: 172 JAMICA DRIVE City-St-Zip: GREENACRES, FL 33413 City-St-Zip: PALM SPRINGS, FL 33461 Title: () Delete Title: (X) Change () Addition Name: BLANCO, MARTHA Name: BLANCO, MARTHA 3039 CARIBB WAY Address: 172 JAMAICA DRIVE Address: City-St-Zip: PALM SPRINGS, FL 33461 City-St-Zip: LAKE WORTH, FL 33462 Title: () Delete Title: (X) Change () Addition MOLINA, MORENA PABON, ISRAEL Name: Name: 827 SKYPINE WAY A-1 3184 S CONGRESS Address: Address: City-St-Zip: GREENACRES, FL 33415 City-St-Zip: PALM SPRINGS, FL 33461 Title: () Delete Title: () Change () Addition LOPEZ, JORGE Name: Name: Address: 6228 WILLIWGBY CIRCLE Address:

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.

City-St-Zip:

SIGNATURE: MARTHA BLANCO T 04/30/2006

LAKE WORTH, FL 33463

City-St-Zip: