

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Aug 07, 2008
Secretary of State**

DOCUMENT# N94000002229

Entity Name: CENTRO CULTURAL LATINOAMERICANO INC.

Current Principal Place of Business:3554 LAKE WORTH RD
LAKE WORTH, FL 33461**New Principal Place of Business:**1013 LUCERNE AVE
LAKE WORTH, FL 33460**Current Mailing Address:**PO BOX 6474
LAKE WORTH, FL 334666474**New Mailing Address:**

FEI Number: 65-0487635

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:COLOMBIAN CHAMBER OF COMMERCE
PO BOX 9522
CORAL SPRINGS, FL 33075 US**Name and Address of New Registered Agent:**CENTER FOR MINORITY HUMAN SERVICES
1124 BROADWAY
C
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: MARTHA PARDO

08/07/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: PD () Delete
Name: SOTO, JAMES
Address: 5070 SW 24 STREET
City-St-Zip: PLANTATION, FL 33317Title: VD () Delete
Name: BONACIA, CARLOS
Address: PO BOX 9522
City-St-Zip: CORAL SPRINGS, FL 33075Title: S () Delete
Name: CONTANZA, JOHANNA
Address: PO BOX 9522
City-St-Zip: CORAL SPRINGS, FL 33075Title: T () Delete
Name: GARCIA, SAMUEL
Address: PO BOX 9522
City-St-Zip: CORAL SPRINGS, FL 33075**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: PD (X) Change () Addition
Name: VEGA, CLADIA P
Address: P.O. BOX 6474
City-St-Zip: LAKE WORTH, FL 33466Title: VD (X) Change () Addition
Name: OROZCO, JOHN
Address: PO BOX 6474
City-St-Zip: LAKE WORTH, FL 33466Title: S (X) Change () Addition
Name: PRIETO, JOHANNA
Address: PO BOX 6474
City-St-Zip: LAKE WORTH, FL 33466Title: T (X) Change () Addition
Name: RODRIGUEZ, EDITH
Address: PO BOX 6474
City-St-Zip: LAKE WORTH, FL 33466

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: MARTHA PARDO

CEO

08/07/2008

Electronic Signature of Signing Officer or Director

Date