

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000003700

FILED  
Apr 20, 2011  
Secretary of State

**Entity Name:** CASA DE RESTAURACION COMMUNITY CHURCH A/G CORP.

**Current Principal Place of Business:**

1731 N.E. 146 ST  
NORTH MIAMI, FL 33181

**New Principal Place of Business:**

**Current Mailing Address:**

6770 EVANS STREET  
HOLLYWOOD, FL 33024

**New Mailing Address:**

**FEI Number:** 65-0602498

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CABALLERO, VICTOR  
6770 EVANS STREET  
HOLLYWOOD, FL 33024 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: PD  
Name: CABALLERO, VICTOR  
Address: 6770 EVANS STREET  
City-St-Zip: HOLLYWOOD, FL 33024

Title: SD  
Name: MELENDEZ, LISANDRA  
Address: 1523 NE 143 ST  
City-St-Zip: MIAMI, FL 33161

Title: TD  
Name: BRYANT, CARMAN  
Address: 14637 NE 14 AVE  
City-St-Zip: NORTH MIAMI, FL 33161

Title: D  
Name: DE LA ROSA, ELSA  
Address: 2074 NE 183RD ST  
City-St-Zip: MIAMI, FL 33179

Title: D  
Name: GOMEZ, MARK F  
Address: 1620 NW 132ND ST  
City-St-Zip: MIAMI, FL 33167

Title: VP  
Name: MELENDEZ, DANIEL V P  
Address: 1523 N E 143 ST  
City-St-Zip: N. MIAMI, FL 33161

I hereby 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 all other like empowered.

SIGNATURE: VICTOR CABALLERO

PD

04/20/2011

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

\_\_\_\_\_  
Date