2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 16, 2006
Secretary of State

DOCUMENT# N97000001969

Entity Name: CENTRO INTERNATIONAL RESPLANDECE, INC.

Current Principal Place of Business:

927 PONDELLA DR.
NORTH FORT MYERS, FL 33903

New Principal Place of Business:

1228 EVEREST PKWY
CAPE CORAL, FL 33904

Current Mailing Address:

1228 EVEREST PKWY
CAPE CORAL,, FL 33904

New Mailing Address:

FEI Number: 65-0782390 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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: D ( ) Delete
Name: DENIS, ROSA M
Address: 1228 EVEREST PKWY
City-St-Zip: CAPE CORAL, FL 33904

Title: D ( ) Delete
Name: PARRA, AMPARO
Address: 330 S E 47 TERRACE
City-St-Zip: CAPE CORAL, FL 33904

Title: D ( ) Delete
Name: VALDIVIA, MARIA E
Address: 1228 EVEREST PKWY
City-St-Zip: CAPE CORAL, FL 33904

Title: D ( ) Delete
Name: ALEMAN, ZORAIDA
Address: 4529 SKYLINE BLVD.
City-St-Zip: CAPE CORAL, FL 33914

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: DENIS, ROSA M
Address: 2110 N.E 20TH AVE.
City-St-Zip: CAPE CORAL, FL 33909

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

Title: D (X) Change ( ) Addition
Name: VALDIVIA, MARIA E
Address: 2110 N.E. 20TH AVE
City-St-Zip: CAPE CORAL, FL 33909

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: ZORAIDA ALEMAN D 05/16/2006

Electronic Signature of Signing Officer or Director — Date