

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 07, 2003 8:00 am
Secretary of State

04-07-2003 90220 046 ****61.25

0076956

DOCUMENT # N97000002616

1. Entity Name

CENTRO DE ARTES Y OFICIOS DE LA SALLE INC.



Principal Place of Business

**31250 S W 134TH AVENUE
HOMESTEAD FL 33030
US**

Mailing Address

**31250 S W 134TH AVENUE
HOMESTEAD FL 33030
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0759494**

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**DORADO, JOSE M
4050 SW 134TH AVE
MIAMI FL 33175**

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

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **DP** Delete
NAME **DORADO, JOSE M**
STREET ADDRESS **4050 SW 134TH AVE**
CITY-ST-ZIP **MIAMI FL 33175**

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **DS** Delete
NAME **MANZANERO, MIGUEL**
STREET ADDRESS **5601 COLLINS AVE APT 917**
CITY-ST-ZIP **MIAMI BEACH FL 33140**

TITLE Change Addition
NAME **JULIO GONZALEZ-PORT**
STREET ADDRESS **8770 SW 97 TERR. VONDO, JULIO**
CITY-ST-ZIP **MIAMI, FL 33176 DS**

TITLE **DT** Delete
NAME **ERVITI, GUSTAVO A**
STREET ADDRESS **2700 SW 98TH AVE**
CITY-ST-ZIP **MIAMI FL 33165**

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **DVP** Delete
NAME **SANCHEZ, GONZALO**
STREET ADDRESS **3301 MONEGRO ST**
CITY-ST-ZIP **CORAL GABLES FL 33134**

TITLE Change Addition
NAME **ROMO-FRANCO, SALVADOR**
STREET ADDRESS **13780 S.W. 73 RD CT. DVA**
CITY-ST-ZIP **MIAMI, FL 33158**

TITLE **DVS** Delete
NAME **HOYOS, GEORGE**
STREET ADDRESS **4911 SW 95TH AVE**
CITY-ST-ZIP **MIAMI FL 33173**

TITLE Change Addition
NAME **MANZANERO, MIGUEL**
STREET ADDRESS **5601 COLLINS AVE DVS**
CITY-ST-ZIP **APT. 917 MIAMI, FL 33140**

TITLE **DVT** Delete
NAME **SANTIAGO, RAUL J**
STREET ADDRESS **12802 SW 45TH TERR**
CITY-ST-ZIP **MIAMI FL 33175**

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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: **SIGNATURE REQUIRED M. DORADO**

4/5/2003 (305) 553-5336

CR2E037 (10/02)