2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002463

FILED Apr 21, 2006 Secretary of State

Entity Name: CENTRO CRISTIANO FAMILIAR DE BOCA RATON, INC.

Current Principal Place of Business: New Principal Place of Business:

21121 ORIOLE COUNTRY RD

BOCA RATON, FL 334281195 US

21121 ORIOLE COUNTRY RD

BOCA RATON, FL 33428 US

Current Mailing Address: New Mailing Address:

21121 ORIOLE COUNTRY RD
BOCA RATON, FL 334281195 US
21121 ORIOLE COUNTRY RD
BOCA RATON, FL 33428 US

FEI Number: 65-0838182 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

PUGLIESE, RICARDO PUGLIESE, RICARDO M PD
915 RIVERSIDE DRIVE APT 513 8825 RAMBLEWOOD DR. #1509
CORAL SPRINGS, FL 33071 US CORAL SPRINGS, FL 33071 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: RICARDO M. PUGLIESE 04/21/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PD () Delete Title: PD (X) Change () Addition PUGLIESE, RICARDO M Name: PUGLIESE, RICARDO M

 Name:
 PUGLIESE, RICARDO M
 Name:
 PUGLIESE, RICARDO M

 Address:
 715 RIVERSIDE DR APT 513
 Address:
 8825 RAMBLEWOOD DR. #1509

 City-St-Zip:
 CORAL SPRINGS, FL 33071
 City-St-Zip:
 CORAL SPRINGS, FL 33071

Title: VD () Delete Title: VD (X) Change () Addition

 Name:
 VALLEJO, MARYBEL
 Name:
 VALLEJO, MARYBEL

 Address:
 6001 NW AVE.
 Address:
 3270 CORAL RIDGE DR

 City-St-Zip:
 COCONUT CREEK, FL 33073
 City-St-Zip:
 CORAL SPRINGS, FL 33065

Title: TRD () Delete Title: TRD (X) Change () Addition Name: PUGLIESE, ROSA Name: PUGLIESE, ROSA

Address: 915 RIVERSIDE DR APT 513 Address: 8825 RAMBLEWOOD DR. #1509
City-St-Zip: CORAL SPRINGS, FL 33071 City-St-Zip: CORAL SPRINGS, FL 33071

Title: SD () Delete Title: () Change () Addition

 Name:
 RUIZ, OLGA
 Name:

 Address:
 1417 NW 62 AVE.
 Address:

 City-St-Zip:
 MARGATE, FL 33063
 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: RICARDO M. PUGLIESE PD 04/21/2006