

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 29, 2004  
Secretary of State**

DOCUMENT# N98000004073

Entity Name: CENTRO INTERNACIONAL DE ALABANZA NORTE, INCORPORATED

**Current Principal Place of Business:**

14100 PALMETTO FRONTAGE RD  
SUITE 106  
MIAMI LAKES, FL 33016

**New Principal Place of Business:**

1800 W 68 STREET  
SUITE 137  
HIALEAH, FL 33014

**Current Mailing Address:**

14100 PALMETTO FRONTAGE RD  
SUITE 106  
MIAMI LAKES, FL 33016

**New Mailing Address:**

1800 W 68 STREET  
SUITE 137  
HIALEAH, FL 33014

FEI Number: 65-0849433      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

JAIME, JULIO  
14100 PALMETTO FRONTAGE RD  
SUITE 106  
MIAMI LAKES, FL 33016

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

JAIME, JULIO  
1800 W 68 STREET  
SUITE 137  
HIALEAH, FL 33014

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: JULIO JAIME      04/29/2004  
Electronic Signature of Registered Agent      Date

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: JAIME, JULIO  
Address: 6930 NW 177 SUITE 103  
City-St-Zip: MIAMI, FL 33015

Title: DS ( ) Delete  
Name: JAIME, CLAUDIA  
Address: 6930 NW 177 ST SUITE 103  
City-St-Zip: MIAMI, FL 33015

Title: DV (X) Delete  
Name: JAIME, JULIO  
Address: 2690 W 76TH ST #104  
City-St-Zip: HIALEAH, FL 33016

Title: D (X) Delete  
Name: JAIME, CLAUDIA  
Address: 2690 W 76TH STREET  
City-St-Zip: HIALEAH, FL 33016

Title: DV ( ) Delete  
Name: ABAD, JORGE G  
Address: 6962 NW 179 STREET AP 211  
City-St-Zip: MIAMI, FL 33015

Title: D ( ) Delete  
Name: ABAD, YENISSET  
Address: 6962 NW 179 STREET AP 211  
City-St-Zip: MIAMI, FL 33015

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP (X) Change ( ) Addition  
Name: JAIME, JULIO  
Address: 6930 NW 177 SUITE O-103  
City-St-Zip: MIAMI, FL 33015

Title: DS (X) Change ( ) Addition  
Name: JAIME, CLAUDIA  
Address: 6930 NW 177 ST SUITE O-103  
City-St-Zip: MIAMI, FL 33015

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

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

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

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 Section 119.07(3)(i), 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: JULIO JAIME      DP      04/29/2004  
Electronic Signature of Signing Officer or Director      Date