

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006670

FILED
Apr 29, 2005
Secretary of State

Entity Name: L.L.E.A.AF.AM. - SIDA LIGA LATINEUROASIAAFROAMERICANA, CONTRA EL SIDA, INC.

Current Principal Place of Business:

P.O. BOX 557432
MIAMI, FL 33255

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 557432
MIAMI, FL 33255

New Mailing Address:

FEI Number: 65-0879709

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REVILLA, JOSE M
789 NW 27 AVE
MIAMI, FL 33125 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: P () Delete
Name: SANTOS, LIZETTE
Address: P.O. BOX 557432
City-St-Zip: MIAMI, FL 33255

Title: V () Delete
Name: REVILLA, JOSE M
Address: P.O. BOX 557432
City-St-Zip: MIAMI, FL 33255

Title: D () Delete
Name: FRAGA, MANUEL
Address: P.O. BOX 557432
City-St-Zip: MIAMI, FL 33255

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: JOSE M REVILLA

V

04/29/2005

Electronic Signature of Signing Officer or Director

Date