## 2004 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

## DOCUMENT # N99000002891

1. Entity Name

## SOCIEDAD DE ESTUDIO E INVESTIGACION.



## FILED Apr 14, 2004 8:00 am Secretary of State

04-14-2004 90074 025 \*\*\*\*61.25



CIENTIFICA DE LOS FENOMENOS ESPIRITUALES JOSE				
Principal Place of Business		Mailing Address		
13330 S.W. 26TH TERRACE MIAMI FL 33175		13330 S.W. 26TH TERRACE MIAMI FL 33175		TZOOMINA
2. Principal Place of Business		3. Mailing Address		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		MOORE CR2E037 (11/03)
City & State		City & State		4. FEI Number Applied For Not Applied ble
Zip	Country	Zip	Country	5. Certificate of Status Desired   \$8.75 Additional Fee Required
	6. Name and Address of Current	Registered Agent	Nama	7. Name and Address of New Registered Agent
	A ODLIZ ANCELA	فايان يبايد عه فليبلو عام الا الا يبيود من الله	Name	والروايين والمتعاولة والمتعاولة والمالية والمتعاولة وال
1333	6. Name and Address of Current Registered Agent  Name  LA CRUZ, ANGELA 330 S.W. 26TH TERRACE  AMI FL 33175  City  FL Zip Code  Ver 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 ations of registered agent.			
			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  SIgnature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE				
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  PILE NOW: FEE IS \$61.25  9. Election Campaign Financing \$5.00 May Be  Make Check Payable to				
	图,这是不知识的1000元的 不知识 图 2 Green (1985) 1985,一种100元, 1986年1986,是他的主要观众	to a title to the contract of	· • -	Added to Fees Florida Department of State
10.	OFFICERS AND DI		11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10
TITLE NAME	DE LA CRUZ, ANGELA	☐ Delete	TITLE NAME	Change Addition
*STREET ADDRESS	13330 S.W. 26TH TERRACE		STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33175		CITY-ST-ZIP	
TITLE	DELA CRUZ, MANUEL JR	☐ Delete	TITLE	☐ Change ☐ Addition
NAME STREET ADDRESS	15385 SW 76 TERR #105		NAME STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33193		CITY-ST-ZIP	
TITLE	S DE ARMAS, ELBA	☐ Delete	TITLE	☐ Change ☐ Addition
NAME STREET ADDRESS	8665 NW 6TH LANE #111		NAME STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33193		CITY-ST-ZIP	
TIFLE	T PORTO ELVIDA	☐ Delete	TITLE	☐ Change ☐ Addition
NAME STREET ADDRESS	PORTO, ELVIRA 411 SW 134TH AVE		NAME CIDEET ADDRECC	• .
CITY-ST-ZIP	MIAMI FL 33184		STREET ADDRESS CITY-ST-ZIP	
TITLE	D CURIA ANGEL	☐ Delete	TITLE	☐ Change ☐ Addition
NAME	SURIA, ANGEL 13330 SW 26 TERR		NAME	
STREET ADDRESS CITY-ST-ZIP	MIAMI FL 33175		STREET ADDRESS CITY-ST-ZIP	
TITLE	D CONTORO ALBERTO	☐ Delete	TITLE	☐ Change ☐ Addition
NAME.	CRESPO, ALBERTO 6362 SW 114TH AVENUE		NAME CTOSET ADDRESS	
STREET ADDRESS CITY-ST-ZIP	MIAMI FL 33173		STREET ADDRESS CITY-ST-ZIP	
<u> </u>	and it is that the information supplied with	h this filing door not qualify fo		Section 119 07(3)(i) Florida Statutos I further certify that the information

rnereby certify mat the information supplied with finishing does not qualify 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 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.

OF SIGNING OFFICER OR DIRECTOR

1223 0859

Daylime Phone #