

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

DOCUMENT# N99000004317

**FILED**  
**May 22, 2004**  
**Secretary of State****Entity Name:** CENTRO CULTURAL DE PUERTO RICO EN EL SUR DE LA FLORIDA, INC.**Current Principal Place of Business:**1400 SALCEDO ST.  
APT. 401  
CORAL GABLES, FL 33134**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 6621  
MIAMI, FL 33152**New Mailing Address:****FEI Number:** 65-0947916**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**RODRIGUEZ, JOSE  
16504 BRIDGE END RD.  
MIAMI LAKES, FL 33014**Name and Address of New Registered Agent:**ACEVEDO, PETER  
8825 SW 17 TERRACE  
MIAMI, FL 33165

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: PETER ACEVEDO

05/22/2004

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:****Title:** PD ( ) Delete  
**Name:** VENEGAS, NORAH  
**Address:** 1400 SALCEDO ST.  
**City-St-Zip:** CORAL GABLES, FL 33134**Title:** STD ( ) Delete  
**Name:** PONTON, ELSA  
**Address:** 8852 WS 4 LN  
**City-St-Zip:** MIAMI, FL 33174**Title:** D ( ) Delete  
**Name:** ORTIZ, VICTOR  
**Address:** 7440 SW 100 CT.  
**City-St-Zip:** MIAMI, FL 33174**Title:** D ( ) Delete  
**Name:** FIGUEROA, SILVIA  
**Address:** 3795 W 7 CT  
**City-St-Zip:** MIAMI, FL 33012**Title:** V ( ) Delete  
**Name:** AVEVEDO, PETER  
**Address:** 9288 N.W. 17 ST  
**City-St-Zip:** CORAL SPRINGS, FL 33071**Title:** D ( ) Delete  
**Name:** RODRIGUEZ, JOSE L  
**Address:** 7018 N.W. 39 CT.  
**City-St-Zip:** CORAL SPRINGS, FL 33065**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:****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: WALDO MEDINA

TR

05/22/2004

Electronic Signature of Signing Officer or Director

Date