2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 31, 2015
Secretary of State
CC0115836670

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Entity Name: CENTRO CRISTIANO FAMILIAR NUEVA VIDA INC.

Current Principal Place of Business:

7920
PORT RICHEY, FL 34668

Current Mailing Address:

12025 HUDSON RIDGE DRIVE
APT. #303
PORT RICHEY, FL 34606 US

FEI Number: 27-5562151

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MARTINEZ, DAVID
9318 KENT ST
SPRING HILL, FL 34606 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:

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	PCOB
Name	MARTINEZ, DAVID
Address	9318 KENT ST
City-State-Zip:	SPRING HILL FL 34606

Title	VPD
Name	MIRANDA, LISANDRA
Address	9318 KENT ST
City-State-Zip:	SPRING HILL FL 34606

Title	SECRETARY
Name	SANCHEZ , WANA
Address	9318 KENT ST
City-State-Zip:	SPRING HILL FL 34606

Title	TREASURER
Name	MOTA , ANGELISSE
Address	9318 KENT ST
City-State-Zip:	SPRING HILL FL 34606

Title	DIRECTOR
Name	DIAZ, MARGAROT
Address	9318 KENT ST
City-State-Zip:	SPRING HILL FL 34606

Title	DIRECTOR
Name	DIAZ, MARGAROT
Address	9318 KENT ST
City-State-Zip:	SPRING HILL FL 34606

I hereby 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 all other like empowered.

SIGNATURE: ANGELISSE MOTA TREASURER 08/31/2015

Electronic Signature of Signing Officer/Director Detail — Date