FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT 1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 28 1997 8:00am
Secretary of State

DOCUMENT # 713994

1. Corporation Name

Centro Asturiano de Tampa

Principal Place of Business	Mailing Address
Tampa, Florida	1913 Nebraska Avenue

3. Date Incorporated or Qualified: 1-23-68	3a. Date of Last Report: 4-1-96
4. FEI Number: 59-0148165	☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No	

2. Principal Place of Business	2a. Mailing Address
21 Tampa, Florida	26 1913 Nebraska Avenue
Suite, Apt. #, etc. 22 1913 Nebraska Avenue	Suite, Apt. #, etc. 27
City & State 23 Tampa, Florida 33602	City & State 28 Tampa, Florida 33602
Zip 24 33602 Country 25 USA	Zip 29 33602 Country 30 USA

9. Name and Address of Current Registered Agent

Elvira T. Garcia
1913 Nebraska Ave.
Tampa, Florida 33602

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Elvira T. Garcia — Signature, typed or printed name of registered agent and title if applicable
Elvira T. Garcia, President (NOTE: Registered Agent's signature required when reinstating)
4-18-97 DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President Elvira T. Garcia 4805 Mendenhall Dr. Tampa, Florida 33602 ☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice-President Manuel Blanco 1402 N. Matanzas Ave. Tampa, Florida 33607 ☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Treasurer Elvira Stoeltzing 4933 Layford Cay Drive Tampa, Florida 33629 ☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Eva Ciaccio 3115 Cherry St. Tampa, Florida 33607 ☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	☐ Change ☐ Addition 900002159069 -04/23/97--01099--065 ***61.25
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director William Garcia 4805 Mendenhall Dr. Tampa, Florida 33603 ☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	☐ Change ☐ Addition 4/28/97
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Joe Perez 1519 River Lane Dr. Tampa, Florida 33603 ☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	☐ Change ☐ Addition 900002159069 -04/23/97--01099--065 ***

CR2E037 (9/96)

14. I do hereby certify that the information submitted with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Elvira T. Garcia — Elvira T. Garcia, President — 4-18-97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #