## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 30 1997 8:00am

Secretary of State

305-4610436

Daylime Phone # 0033885

A AMBARA KANIN AKNAN MINUL KATAN DIRIK BANA DIRIK BANDI BIRIK DIRIK DIRIK DIRIK DIRIK DIRIK DIRIK DIRIK DIRIK

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 726864

(2)

MUNICIPIO DE PUERTO PADRE EN EL EXILIO, INC.

		Mailing Address								
Principal Place	e of Business									
405 NW 119 AV MIAMI FL 33182	405 NW 119 AVE MIAMI FL 33182-1335 US	*** *** ***			•					
US		03			3. Date	Incorporated or Qualified 17/05/1973	3a. Da	4/23/19	teport 36	
2. Principal P	lace of Business	2a. Mailing Address 26			4. FEI N	Number 9-1987552			oplied For of Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5 Certi	ficate of Status Desired		\$8.75	Additional	
City & State		City & State				Fee Required				
23		28				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zıp	Country Zip		Co	Country		corporation has liability for	r intangible		·	
24 25		29		Florida Statutes Yes No						
	9. Name and Address of Current	Registered Agent			10. Nam	e and Address of New R	egistered A	gent	····	
				81 Name	class 6	Saurales			•	
	NE FERNANDEZ OCHOA		82 Street Address (P.O. Box Number is Not Acceptable)							
10101 W	OKEECHOBEE RD #10101	1523			238.W1	S.W 142 Ave.				
HIALEAH	GARDENS FL 33016			83						
				84 City.				85 Zip	Code	
				1	1041		FL	33,	184	
11. Pursuant	to the provisions of Sections 617.0502 egistered agent, or both, in the State in familiar with, and accept the obliga	and 617.1508, Florida Statul	les, the a	bove-named	corporation sub	mits this statement for the	purpose of	changing i	ts registered	
agent. I a	in familiar with and accept the obliga	tions of Section 617.0503, Fi	orida Sta	atutes.	JOIANON & DUAIG		ahr ma ahh	JII III II II CAS	i legisleled i	
SIGNATURE	VIBILIFUNIANI	2//K.P	JOSE	_	ylez /	1 E SOA W		3/23/	97	
	dignature, typed or profile frame of registered ager				required when reinsta	ting)	DATE			
12.	OFFICERS AND	DELETE	13.		ADDII	TIONS/CHANGES TO OFFI	ICERS AND	☐ Change	Addition	
THLE	FERNANDEZ, ALFREDO	- DELETE	1.1 T					FT CIMINE	LI ADDITION	
NAME	405 NW 119 AVE			VAME						
STREET ADDRESS	MIAMI FL			STREET ADDRESS						
CITY-SI-ZIP TITLE	SD	<b>▼</b> DELETE	2.1 T	CITY-ST-ZIP	5D			Change	Addition	
NAME	OCHOA, JOSEPHINE F	<del></del>		VAME	Carrenda	وء ماهو		FT Curando	ESC PROGRESS	
STREET ADDRESS	10101 W OKEECHOBEE RD #	10101	404		Gouzalez Jose 15235W 142 Ave					
CITY-ST-ZIP	HIALEAH GARDENS FL			Street address City-St-Zip	HION	Fc. 33184	,			
TITLE	TD	DELETE	3.1 T		7.0			Change	Addition	
NAME	PEDRAZA, ISIDRO F.		3.2 N	IAME				- •		
STREET ADDRESS	741 NAVARRE AVE.		3.3 5	STREET ADDRESS						
CITY-S1-ZIP	CORAL GABLES FL		3.4.1	City-St-Zip						
THRE	VP	DELETE	4.1 T	<del></del>		······································	<del></del>	Change	Addition	
NAME	PEREZ, ANGEL		4.21	NAME						
STREET ADDRESS	8480 SW 141 ST		4.3 9	STREET ADDRESS						
CITY-ST-ZIP	MIAMI FL		4.40	CITY-ST-ZIP		·				
TITLE	VS	☐ DELETE	5.1 T	TITLE				Change	Addition	
NAME	QUEVEDO, ANTONIO		5.2 N	IAME						
STREET ADDRESS	13221 SW 2ND ST		5.3 S	STREET ADDRESS						
CITY-ST-ZIP	MIAMI FL.		_	CITY-ST-ZIP		.,			7 2 2	
TITLE	VT	☐ DELETE	61 T					L Change	Addition	
NAME	GONZALEZ, JULIANA		11	NAME .						
STREET ADDRESS	5415 W 15 CT HIALEAH FL			STREET ADDRESS						
CITY - ST - ZIP	TIALCAN FL by certify that the information supplied	Lwith this filing does not qual		OTY-ST-ZIP	lated in Section	119 07/3Vi) Florida Statut	oe I further	cartify that	the	
informatio Lam an o	on indicated on this annual report or so fficer or director of the corporation or	upplemental annual report is the receiver or trustee amport	true and vered to	accurate and	that my signatu	re shall have the same led	al effect as	if made un	der oath: tha	
appears i	in Block 12 or Block 13 if changed, or	on an attachment with an ad	dress.		•					