

**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

APPROVED  
02-07-2006 90030 018 \*\*\*61.00  
FILED 726864

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # 726864**  
1. Entity Name  
MUNICIPIO DE PUERTO PADRE EN EL EXILIO, INC.



Principal Place of Business      Mailing Address  
2513 SW 112 CT                      2513 SW 112 CT  
MIAMI, FL 33165 US                      MIAMI, FL 33165 US



01232008 No Chg-NP      CR2E037 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number      Applied For  
59-1987552      Not Applicable

5. Certificate of Status Desired       \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
MULET, ALBERTO  
2513 SW 112 CT  
MIAMI, FL 33165

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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: *Alberto Mulet*      DATE: \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)

**Filing Fee is \$61.25  
Due by May 1, 2006**

9. Election Campaign Financing Trust Fund Contribution.       \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD FERNANDEZ, ALFREDO 3220 NW 14 TERRACE MIAMI, FL 33184
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD MULET, ALBERTO 2513 SW 112 CT MIAMI, FL 33165
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD FUENTE, SERAFIN 13244 SW 29 TERRACE MIAMI, FL 33175
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VS ALVAREZ, ERIC 427 GOLDEN ISLE DA, # 8C HALLANDALE, FL 33009
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

SIGNATURE: *Alberto Mulet*      2/23/06      Daytime Phone # \_\_\_\_\_  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR