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Jun 17 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # N14312 (5)

1. Corporation Name

JUNTA PATRIOTICA CUBANA, INC.

Principal Place of Business

Mailing Address

4600 N.W. 7TH STREET
MIAMI FL 33126-2309

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MIAMI FL 33126-2309



3. Date Incorporated or Qualified
04/10/1986

3a. Date of Last Report
02/08/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 Zip Country

4. FEI Number
59-2668495

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DE CARDENAS, MARIO E.
14 N.E. FIRST AVE. #704
MIAMI FL 33132

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME RODRIGUEZ-ARAGON, ROBERTO DR.
STREET ADDRESS 935 SW 24 ROAD
CITY-ST-ZIP MIAMI FL

TITLE VD
NAME ABREU, ING. ERNESTINO
STREET ADDRESS 2750 SW 128TH ST
CITY-ST-ZIP MIAMI FL

TITLE VD
NAME PEREZ-FRANCO, JUAN
STREET ADDRESS 600 GREGTHREE DR #10FS
CITY-ST-ZIP KEY BISCAYNE FL

TITLE VD
NAME POMAR, FACUNDO
STREET ADDRESS 70 WEST 95TH ST #1-G
CITY-ST-ZIP NEW YORK NY

TITLE TD
NAME ESPINOZA, ZENOBIO DR
STREET ADDRESS 1922 SW 72 PL
CITY-ST-ZIP MIAMI FL

TITLE SD
NAME ACOSTA, JORGE ALVAREZ
STREET ADDRESS 13501 SW 38 STREET
CITY-ST-ZIP MIAMI FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME Secretario de Finanzas
2.3 STREET ADDRESS Francisco Suarez Roqueta
2.4 CITY-ST-ZIP 6371 SW 13th Terr
Miami, Florida 33155

3.1 TITLE ☒ Change ☐ Addition
3.2 NAME Dra. Leonor Ferreira
3.3 STREET ADDRESS 1420 SW 12th Street
3.4 CITY-ST-ZIP Miami, Florida 33135

4.1 TITLE ☒ Change ☐ Addition
4.2 NAME Ciro Viamonte
4.3 STREET ADDRESS 851 NW 14 Ct.
4.4 CITY-ST-ZIP Miami, Florida 33125

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME Secretario de Organizacion
5.3 STREET ADDRESS 300002216153
5.4 CITY-ST-ZIP -06/18/97--01067--027
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6.1 TITLE ☒ Change ☐ Addition
6.2 NAME Secretario de Actas
6.3 STREET ADDRESS Ivan Hernandez
6.4 CITY-ST-ZIP 1101 NW 26 Street
Miami, Florida 33127

14. I do hereby certify that the information supplied 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

[Signature]

9/97

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6/17/97