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NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #- Corporation Name

CITY-ST-ZIP

(5)

JUNTA PATRIOTICA CURANA INC

FILED Feb 24 1998 8:00am Secretary of State

JOHIA	FAIRIOI	IOA CUBANA, II	v C.													
Principal Plac	e of Business	i	Mailing Address						ı	IDBEIIDI DAI	! !! !!! !!!!!!		HELDIKU (HEN BIOK	AIBH BI	VII E1811 (VA)
4600 N.W. 7TH MIAMI FL 33126			4600 N.W. 7TH STREET MIAMI FL 33126-2309						Incorpor 04/10/1		ualified					
									4. FEI							plied For
2. Principal P	lace of Busine	nee	26. 1	Mailing Address						59-2668	3495					ot Applicable
21			26	26					5. Cert	ficate of	Status De	sired		•		Additional equired
Suite, Apt.	#, etc.		-	Suite, Apt. #, etc.				- 1		tion Camp	-	_				Мау Ве
City & State			27	City & State						t Fund Co			<u> </u>			Fees
23	-		—	28				7. Is this nonpro			nt corpora			ers asso No	CIETIO	nr
Zip		Country		(p	Co	untry		1	8. This	corporati	on owes				ar Int	angible
24		25	29		30				Pers	onal Prop	erty Tax o	due June	30 .	Yes	<u> </u>	No
	9. Name	and Address of Curr	ent Register	red Agent		-			IO. Nan	e and Ac	idress of	New Re	egistered	Agent		
						81	Name									
DE CARI		82 Street Addr			Address	(P.O. B	ox Numb	er is Not	Accepta	ple)						
MIAMI FI						83										
:						84	City							85	Zip	Code
	 					LL							FI		•	
Office or re	to the provision	ons of Sections 617.0 ont, or both, in the Sta h, and accept the obl	502 and 617. te of Florida.	.1508, Florida Statu Such change was	tes, the a authorize	above ad by	named the con	corporat	ition sub 's board	mits this a of directo	statement ors. I here	for the p	purpose of the an	of chang	ging It	s registered
agent. Fai	m familiar witi	h, and accept the obl	igations of, S	ection 617.0503, F	orida Ste	itutes		,				-,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	- p		
SIGNATURE _	Signature hand	r printed name of registered a	anni and tela K a	and and the same	tr. Donatara				.							
12.	Signature typeu c	OFFICERS A			13.		ni signatura	required with		ting) TONS/CH	ANGES 1	O OFFIC	DATE CERS AN	ID DIRE	CTOR	S IN 12
TITLE	PD			☐ DELETE	1.11	ITLE		T								Addition
NAME	RODRIGU	EZ-ARAGON, ROB				1.2 NAME										
STREET ADDRESS	935 SW 2				1.3 \$	TREET	ADDRESS									
CITY-ST-ZIP	MIAMI FL				140	ITY-\$	T- 2 IP									
TITLE	VD			☐ DELETE	2.11			1						CI	nange	Addition
NAME	ROQUETA	A, FRANCISCO S			2.21	IAME										
STREET ADDRESS	6371 SW	13TH TERR			2.3 9	TREET	ADDRESS									
CITY-ST-ZIP	MIAM) FL	33155			2.4	CITY-S	T-ZIP									
TITLE	VD			DELETE	3.1 ĭ	ITLE								□ ci	ange	■ Addition
NAME		I, LEONOR			3.2 N	IAME		1								
STREET ADDRESS		12TH STREET			3.3 9	TREET	ADDRESS									
CITY-ST-ZIP	MIAMI FL	33135			3.4.	CITY-S	T-ZIP									
TITLE	VD			☐ DELETE	411	ITLE		۷D						□ Ch	ange	☐ Addition
NAME	VIAMONT	-				4. 2 NAME		Eddy	Ŗiqu	uenes						
STREET ADDRESS	851 NW 1				4.3 \$	TAEET .	ADDRESS	5910	SW	10 St						
CITY+ST-ZIP	MIAMI FL	33125			4.4 0	ITY-SI	r-ZIP	Miami	<u>i., F</u>	orida	a 331	44				
TITLE	TD			DELETE	5.1 7									☐ Cr	ange	Addition
NAME		A, ZENOBIO DR			5.2 N	AME										
STREET ADDRESS	1922 SW	12 PL			5.3 \$	TREET.	ADDRESS	•								
CITY-ST-ZIP	MIAMI FL			TT ====	_	ITY-\$1	- ZIP							-		
TITLE	SD			DELETE	6.1 T									☐ Ci	ange	Addition
NAME	HERNAND	•				AME										
STREET ADDRESS	1101 NW	26 STREET			6.3 \$	TREET	ADDRESS	1								•

e 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 of report or supplemental annual seport is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an incorporation or the receiver or trusted empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in if dhanged for on an attachment with an address. 14. Thereby certify that the informeti-indicated on this angust report o officer or director of the corporat Block 12 or Block 3 if changed.