NONPROFIT CORPORATION ANNUAL REPORT
1997

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

FILED
May 23 1997 8:00am
Secretary of State

DOCUMENT # N32059   (0)

1. Corporation Name

PADRE FELIX VARELA FOUNDATION, INC.

Principal Place of Business	Mailing Address
15630 SW 42ND LANE MIAMI FL 33185 US	15630 SW 42ND LANE MIAMI FL 33185-5211 US

3. Date Incorporated or Qualified	3a. Date of Last Report
05/01/1989	05/01/1996

2. Principal Place of Business 21	2a. Mailing Address 26	4. FEI Number 65-0132229	Applied For Not Applicable
Suite, Apt #, etc. 22	Suite, Apt. #, etc. 27	5. Certificate of Status Desired ☒	**$8.75** Additional Fee Required
City & State 23	City & State 28	6. Election Campaign Financing Trust Fund Contribution ☐	**$5.00** May Be Added to Fees
Zip 24	Country 25	Zip 29	Country 30	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 LA TORRE, ROGELIO 15630 S.W. 42ND LANE MIAMI FL 33185	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	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE **PD** ☐ DELETE NAME **DELATORRE, ROGELIO** STREET ADDRESS **15630 SW 42ND LANE** CITY-ST-ZIP **MIAMI FL**	1.1 TITLE **PD** ☒ Change ☐ Addition 1.2 NAME **Cobelo, Armando F.** 1.3 STREET ADDRESS **Miami, Florida 33144** 1.4 CITY-ST-ZIP
TITLE **VD** ☐ DELETE NAME **DELATORRE, ROGELIO** STREET ADDRESS **15630 SW 42ND LANE** CITY-ST-ZIP **MIAMI FL**	2.1 TITLE ☐ Change ☐ Addition 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP
TITLE **SD** ☐ DELETE NAME **MULLER, FRANCISCO J** STREET ADDRESS **8025 SW 15 ST** CITY-ST-ZIP **MIAMI FL**	3.1 TITLE ☐ Change ☐ Addition 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP
TITLE **VS** ☐ DELETE NAME **DELATORRE, AMALIA V** STREET ADDRESS **15630 SW 42ND LANE** CITY-ST-ZIP **MIAMI FL**	4.1 TITLE ☐ Change ☐ Addition 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP
TITLE **T** ☐ DELETE NAME **ABISLAIMAN, RAFAEL B.** STREET ADDRESS **9840 SW 48TH ST** CITY-ST-ZIP **MIAMI FL**	5.1 TITLE **T** ☒ Change ☐ Addition 5.2 NAME **Teodoro Gomar** 5.3 STREET ADDRESS **5921 SW 79 Ct** 5.4 CITY-ST-ZIP **Miami, FL 33143**
TITLE **VT** ☐ DELETE NAME **ABISLAIMAN, RAFAEL B** STREET ADDRESS **9840 SW 48TH ST** CITY-ST-ZIP **MIAMI FL**	6.1 TITLE ☐ Change ☐ Addition 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

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: _____ PRESIDENT   5-19-97

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #

CR2E037 (9/96)