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Feb 06 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N32059 (0)
 1. Corporation Name
PADRE FELIX VARELA FOUNDATION, INC.



Principal Place of Business 15630 SW 42ND LANE MIAMI FL 33185 US	Mailing Address 15630 SW 42ND LANE MIAMI FL 33185 US
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3. Date Incorporated or Qualified 05/01/1989	Applied For <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
4. FEI Number 65-0132229	Not Applicable <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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9. Name and Address of Current Registered Agent DE LA TORRE, ROGELIO 15630 S.W. 42ND LANE MIAMI FL 33185	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	PD
NAME	COBELO, ARMANDO F	1.2 NAME	DE LA TORRE, AMALIA V
STREET ADDRESS	15630 SW 42ND LANE	1.3 STREET ADDRESS	15630 SW 42 LANE
CITY-ST-ZIP	MIAMI FL	1.4 CITY-ST-ZIP	MIAMI FL 33185
TITLE	VD	2.1 TITLE	VD
NAME	DELATORRE, ROGELIO	2.2 NAME	COBELO, ARMANDO F
STREET ADDRESS	15630 SW 42ND LANE	2.3 STREET ADDRESS	15630 SW 42 LANE
CITY-ST-ZIP	MIAMI FL	2.4 CITY-ST-ZIP	MIAMI FL 33185
TITLE	SD	3.1 TITLE	SD
NAME	MULLER, FRANCISCO J	3.2 NAME	GARCIA, LAURA
STREET ADDRESS	8025 SW 15 ST	3.3 STREET ADDRESS	4311 SW 3 ST
CITY-ST-ZIP	MIAMI FL	3.4 CITY-ST-ZIP	MIAMI FL 33134
TITLE	VS	4.1 TITLE	VS
NAME	DELATORRE, AMALIA V	4.2 NAME	MIRET, GERMAN
STREET ADDRESS	15630 SW 42ND LANE	4.3 STREET ADDRESS	8260 SW 91 ST
CITY-ST-ZIP	MIAMI FL	4.4 CITY-ST-ZIP	MIAMI FL 33156
TITLE	T	5.1 TITLE	T
NAME	GOMAR, TEODORO	5.2 NAME	GOMAR, TEODORO
STREET ADDRESS	5921 S.W. 79 CT	5.3 STREET ADDRESS	5921 SW 79 CT
CITY-ST-ZIP	MIAMI FL	5.4 CITY-ST-ZIP	MIAMI FL 33143
TITLE	VT	6.1 TITLE	VT
NAME	ABISLAIMAN, RAFAEL B	6.2 NAME	ROCA, ERILIO
STREET ADDRESS	9840 SW 48TH ST	6.3 STREET ADDRESS	600 NW 34 AVE
CITY-ST-ZIP	MIAMI FL	6.4 CITY-ST-ZIP	MIAMI FL 33125

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TITLE	VS	4.1 TITLE	VS
NAME	DELATORRE, AMALIA V	4.2 NAME	MIRET, GERMAN
STREET ADDRESS	15630 SW 42ND LANE	4.3 STREET ADDRESS	8260 SW 91 ST
CITY-ST-ZIP	MIAMI FL	4.4 CITY-ST-ZIP	MIAMI FL 33156
TITLE	T	5.1 TITLE	T
NAME	GOMAR, TEODORO	5.2 NAME	GOMAR, TEODORO
STREET ADDRESS	5921 S.W. 79 CT	5.3 STREET ADDRESS	5921 SW 79 CT
CITY-ST-ZIP	MIAMI FL	5.4 CITY-ST-ZIP	MIAMI FL 33143
TITLE	VT	6.1 TITLE	VT
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Laura Garcia **RECEIVED** 1/28/98 (205) 442-2495

CR2E037 (10/97)