

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

FILED

98 APR 28 AM 8:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N39841**

1. Corporation Name
ASOCIACION NACIONAL DE HACENDADOS DE CUBA, INC.

Principal Place of Business

~~701 BRICKELL AVE~~
~~SUITE 2150~~
MIAMI FL 33131
US

Mailing Address

701 BRICKELL AVE
SUITE 2150
MIAMI FL 33131
US

If above addresses are incorrect in any way, line through incorrect information and enter correction below.



REINSTATEMENT

97-98
4/28/98

2. New Principal Office Address, if Applicable

~~1101 Brickell Ave.~~
Suite, Apt. #, etc. **Ste. 1400**
City & State

3. New Mailing Office Address, if Applicable

~~1101 Brickell Ave.~~
Suite, Apt. #, etc. **Ste. 1400**
City & State

4. Date Incorporated or Qualified To Do Business in Florida **09/05/1990**

5. FEI Number **65-0246763**

Applied For
Not Applicable

6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City & State
DV	ARGUELLES, FERNANDO	1002 ALFONSO AVENUE	CORAL GABLES FL 33146
D	CAMAFREITA, FAUSTINO	3411 SW 12TH STREET	MIAMI FL 33135
DV	CARBALLO, BENITO	5423 NW 192ND LANE	MIAMI FL 33055
TD	ROSELL, TEOBALDO	5819 TURIN ST	CORAL GABLES FL 33146
PD	BEGUIRISTAIN, ALBERTO	5981 SW 88TH ST	MIAMI FL 33158
SD	GUTIERREZ, JR., NICHOLAS J ESQ.	701 BRICKELL AVE., 2150 1400 1400	MIAMI FL 33131

8. Name and Address of Current Registered Agent

GUTIERREZ, JR., NICHOLAS J ESQ.
~~701 BRICKELL AVE~~
~~SUITE 2150~~
MIAMI FL 33131

9. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
1101 Brickell Ave.
Suite, Apt. #, etc. **Ste. 1400**
City
State **FL** Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent *Nicholas J. Gutierrez Jr.*
REGISTERED AGENT MUST SIGN

Date **4/28/98**

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No

(See other side for information on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: *Nicholas J. Gutierrez Jr.* **Nicholas J. Gutierrez Jr., Esq.** Date **4/28/98** Daytime Phone # **(305) 873-1330**

CR2E040 (8/97)