

**FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

**DOCUMENT # N93000000437 (4)**

1. Corporation Name

**ASOCIACION NACIONAL DE MINEROS Y PETROLEROS DE CUBA, INC.**



Principal Place of Business: 2655 LE JEUNE RD. SUITE 539 CORAL GABLES FL 33134 US  
Mailing Address: P.O. BOX 143557 CORAL GABLES FL 33114-3557

3. Date Incorporated or Qualified: 02/02/1993  
3a. Date of Last Report: 08/14/1995  
4. FEI Number: 65-0405993  
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

2. Principal Place of Business: 21 19 West Flagler Street. 22 Suite 414 23 City & State: Miami, Florida 24 Zip: 33130 25 Country: U.S.A.  
2a. Mailing Address: 26 Suite, Apt. #, etc. 27 Suite, Apt. #, etc. 28 City & State 29 Zip 30 Country

9. Name and Address of Current Registered Agent: DIAZ-MASVIDAL, ALBERTO 2655 LE JEUNE RD. SUITE 539 CORAL GABLES FL 33134  
10. Name and Address of New Registered Agent: 81 Name: Alberto Diaz-Masvidal 82 Street Address (P.O. Box Number is Not Acceptable): 19 West Flagler Street 83 Suite 414 84 City: Miami 85 Zip Code: 33130 FL

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: Alberto Diaz-Masvidal, President DATE: 4/22/96

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: VD	NAME: DE LA CAMARA, FRANCISCO	1.1 TITLE: Treasurer	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS: 630 HAMPTON LANE	CITY-ST-ZIP: KEY BISCAIYNE FL	1.2 NAME:	
TITLE: PD	NAME: DIAZ-MASVIDAL, ALBERTO	1.3 STREET ADDRESS:	
STREET ADDRESS: 11105 S.W. 133RD COURT	CITY-ST-ZIP: MIAMI FL	1.4 CITY-ST-ZIP:	
TITLE: SD	NAME: MATRINEZ-DE CASTRO, RAYMUNDO	2.1 TITLE: Secretary	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS: 1780 SW 29TH AVE.	CITY-ST-ZIP: MIAMI FL	2.2 NAME:	
TITLE: D	NAME: MOORE, CLARENCE W	2.3 STREET ADDRESS:	
STREET ADDRESS: 910 17TH ST., NW, STE. 210	CITY-ST-ZIP: WASHINGTON DC	2.4 CITY-ST-ZIP:	
TITLE: T	NAME: REYNALDO, ECTORE T	3.1 TITLE: Director only	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS: 8270 S.W. 31ST ST.	CITY-ST-ZIP: MIAMI FL	3.2 NAME:	
TITLE: D	NAME: DIAZ-DE VILLEGAS, RENE	3.3 STREET ADDRESS:	
STREET ADDRESS: 5700 SW 127TH AVE., APT. 1204	CITY-ST-ZIP: MIAMI FL	3.4 CITY-ST-ZIP:	
		4.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		4.2 NAME:	
		4.3 STREET ADDRESS:	
		4.4 CITY-ST-ZIP:	
		5.1 TITLE: Director only	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
		5.2 NAME:	
		5.3 STREET ADDRESS:	
		5.4 CITY-ST-ZIP:	
		6.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> 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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: Alberto Diaz-Masvidal, President DATE: 4/22/96 DAYTIME PHONE #: (305) 372-1441

CR2E037 (12/95)