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NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N94000001215 (2)

1. Corporation Name

ASOCIACION DE COLONOS DE CUBA, INC.



Principal Place of Business

**10435 SW 41ST TERRACE
MIAMI FL 33165**

Mailing Address

**10435 SW 41ST TERRACE
MIAMI FL 33165**

3. Date Incorporated or Qualified

03/07/1994

3a. Date of Last Report

05/01/1995

2. Principal Place of Business

2a. Mailing Address:

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**DIAZ, EDGARDO M
10435 SW 41ST TERRACE
MIAMI FL 33165**

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

OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

D

☐ DELETE

NAME

PINA, SILVESTRE

STREET ADDRESS

13345 NW 17 PLACE

CITY-ST-ZIP

MIAMI FL 33167

TITLE

D

☐ DELETE

NAME

IGLESIAS, OSCAR

STREET ADDRESS

3470 SW 9 STREET

CITY-ST-ZIP

MIAMI FL 33135

TITLE

D

☐ DELETE

NAME

SARDINA, RICARDO R

STREET ADDRESS

9022 SW 123 CT

CITY-ST-ZIP

MIAMI FL 33186

TITLE

D

☐ DELETE

NAME

SUAREZ, CARLOS

STREET ADDRESS

922 ANNAGLADYS DR

CITY-ST-ZIP

WORTHINGTON OH 43085

TITLE

D

☐ DELETE

NAME

ACOSTA, ALBERTO

STREET ADDRESS

421 NW 109 AVE #1

CITY-ST-ZIP

MIAMI FL 33172

TITLE

D

☐ DELETE

NAME

SANCHEZ, JUAN T

STREET ADDRESS

8840 SW 92 AVE

CITY-ST-ZIP

MIAMI FL 33176

1.1 TITLE

D

☐ Change

☒ Addition

1.2 NAME

OMELIO SOSA

1.3 STREET ADDRESS

440 N.E. 52 St.

1.4 CITY-ST-ZIP

MIAMI, FL. 33137

2.1 TITLE

D

☐ Change

☒ Addition

2.2 NAME

RAMIRO BLANCO

2.3 STREET ADDRESS

329 Aledo Avenue

2.4 CITY-ST-ZIP

Coral Gables, Fl. 33134

3.1 TITLE

D

☐ Change

☒ Addition

3.2 NAME

Rodrigo Rodriguez

3.3 STREET ADDRESS

6141 S.W. 17 St.

3.4 CITY-ST-ZIP

Miami, Fl. 33155

4.1 TITLE

D

☐ Change

☒ Addition

4.2 NAME

Edgardo M. Diaz

4.3 STREET ADDRESS

10435 S.W. 41 Ter.

4.4 CITY-ST-ZIP

Miami, Fl. 33165-4927

5.1 TITLE

☐ Change

☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

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 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:

EDGARDO M DIAZ

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-22-96 (305) 551-8150

Date

Daytime Phone #

CR2E037 (12/95)