2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachme

SIGNATURE:

FILED DGCUMENT # N9600001519 May 01, 2000 8:00 am Secretary of State CENTRO CULTURAL ESPANOL DE COOPERACION IBEROAMER 05-01-2000 90486 042 ****61.25 Mailing Address Principal Place of Business ONE BISCAYNE TOWER. SUITE 3400 ONE BISCAYNE TOWER, SUITE 3400 2 SOUTH BISCAYNE BLVD. 2 SOUTH BISCAYNE BLVD. MIAMI FL 33131-1897 MIAMI FL 33131-1806 2. Principal Place of Business 3. Mailing Address Rь. 800 DOUGLAS 800 DOUGLAS RD Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 170 SUITE SUITE 170 Applied For City & State City & State 4. FEI Number GABLES 65-0718459 GABLES Not Applicable CORAL CORAL \$8.75 Additional Zip Country Country 5. Certificate of Status Desired U.S.A 33134 33134 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name R JVF CORPORATE SERVICES Street Address (P.O. Box Number is Not Acceptable) C/O Steel__Hector & Davis VALDES-FAULI CORPORATE SERVICES, INC. ONE BISCAYNE TOWER, SUITE 3400 200 So. Biscayne Boulevard, Suite 4000 2 SOUTH BISCAYNE BLVD. MIAMI FL 33131-1897 33131 Miami en for the purpose of changing its registered office or registered agent, or both, in the state of Florida. 8. The above named entity submits this statement RIVF CORPORATE SIGNATURE BY: Raul J. Valdes-Fauli, Pres. (NOTE: Registered Agent signature required when reinstating) agent and title if applicable Signature, typed Make Check Payable to FILE NOW: 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. **Department of State** Added to Fees **FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. Change Addition Delete TITLE TITLE VALLAURE, JAVIER #170 NAME NAME DIAZ-PACHE, MIGUEL STREET ADDRESS STREET ADDRESS 2 SOUTH BISCAYNE BLVD. #3400 CITY-ST-ZIP CITY - ST - ZIF CORAL GABLES FL 33134 MIAMI FL Delete Change ☐ Addition TITI F TITLE DT LNAPES, JULIAN 200 DOUGLAS RD, #170 NAME NAME MARQUINA, JOSE M STREET ADDRESS STREET ADDRESS 2 SOUTH BISCAYNE BLVD #3400 CITY-ST-ZIP CITY-ST-7IP CORPL GABLES FL 33134 MIAMI EL Change Addition TITLE DVP ☐ Delete TITLE VALDES-FAULI, RAUL J. NAME NAME VALDES-FAULI, RAUL J. 800 DOUGLAS RD. #170 CORAL GAGLES FL 53 STREET ADDRESS STREET ADDRESS 2 SOUTH BISCAYNE BLVD. #3400 CITY-ST-ZIP CITY-ST-ZIP FL 53134 MIAMI FL ☐ Change Addition ☐ Delete TITLE NAME MUNOZ, SANTIAGO STREET ADDRESS STREET ADDRESS 800 DOUGLAS RD, 170 CITY-ST-ZIP CITY-ST-ZIP CORAL GABLES FL ■ Addition Delete ☐ Change NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 12. I 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 report or supplemental 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 this 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 this 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 this 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 this 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 this 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 this 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 this true and accurate and that my signature shall have the same legal effect as if made under oath; the corporation of the corpo