

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 13 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # N96000005917

1. Corporation Name

SENA FOUNDATION INC.

Principal Place of Business

Mailing Address

11321 WEST FLAGLOR ST
MIAMI, FL 33174

Non-Profit
DO NOT WRITE IN THIS SPACE

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

3. Date Incorporated or Qualified

11-20-96

4. FEI Number

65-0326517

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☒

Yes

☐

No

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

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered
office or registered agent for 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 607.0505, Florida Statutes.

SIGNATURE

Signature of Registered Agent (required when registering)

(NOTE: Registered Agent signature required when registering)

4/15/98

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P.D
ROBERTO ESPINOSA
9395 SW 77 AVE #3042
MIAMI, FL 33156

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP D
J. MARTIN PADILLA
12303 SW 133 CH.
MIAMI, FL 33186

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S.D
IVAN OSORIO PETERS
7855 NW 12th ST, #221
MIAMI, FL 33126

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T.D
JUAN ARCA
512 SW 109 AVE
SWEETWATER, FL 33174

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
RAFAEL SANCHEZ
848 BRICKELL AVE, #500
MIAMI, FL 33131

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MANUEL MENDOZA-CARDENAL
12515 N. KENDALL DR. #222
MIAMI, FL 33186

☐ DELETE

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

☐ Change ☐ Addition

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

☐ Change ☐ Addition

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

☐ Change ☐ Addition

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

☐ Change ☐ Addition

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

☐ Change ☐ Addition

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

☐ Change ☐ Addition

14. 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 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 607, Florida Statutes, and that my name appears in
Block 12 or Block 13 if changed, or only attached with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR

3/31/98 (305) 412-1206

CR2E034 (10/97)