


# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 16, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # N99000003486**

1. Entity Name  
**MUNICIPIO DE COLON EN EL EXILIO, INC.**



Principal Place of Business      Mailing Address  
**2923 NW 22ND AVE., #7**      **2923 NW 22ND AVE., #7**  
**MIAMI FL 33142**      **MIAMI FL 33142**

2. Principal Place of Business      3. Mailing Address

Suite, Apt. #, etc.      Suite, Apt. #, etc.

City & State      City & State

Zip      Country      Zip      Country



MOORE CR2E037 (11/03)

4. FEI Number      Applied For  
**65-0997162**      Not Applicable

5. Certificate of Status Desired      \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**FALCON, ROSARIO**  
**2923 NW 22ND AVE., #7**  
**MIAMI FL 33142**

7. Name and Address of New Registered Agent

Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City      **FL**      Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Rosario Falcon      DATE

Signature, typed or printed name of registered agent and title if applicable.      (NOTE: Registered Agent Signature required when re-registering)

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2004**

9. Election Campaign Financing Trust Fund Contribution.            \$5.00 May Be Added to Fees

**Make Check Payable to Florida Department of State**

**10. OFFICERS AND DIRECTORS**

TITLE NAME	PD FALCON, ROSARIO	<input type="checkbox"/> Delete
STREET ADDRESS	2923 NW 22ND AVE., #7	
CITY - ST - ZIP	MIAMI FL 33142	
TITLE NAME	VD ALFONSO, BENIGNO M	<input type="checkbox"/> Delete
STREET ADDRESS	2460 SW 140TH AVE.	
CITY - ST - ZIP	MIAMI FL 33175	
TITLE NAME	TD PERERA, LIBERTAD E	<input type="checkbox"/> Delete
STREET ADDRESS	7270 SW 113TH CT. CIR.	
CITY - ST - ZIP	MIAMI FL 33173	
TITLE NAME	D GUTIERREZ, JORGE	<input type="checkbox"/> Delete
STREET ADDRESS	9173 FOUNTAINBLUE BLVD., #4	
CITY - ST - ZIP	MIAMI FL 33172	
TITLE NAME		<input type="checkbox"/> Delete
STREET ADDRESS		
CITY - ST - ZIP		
TITLE NAME		<input type="checkbox"/> Delete
STREET ADDRESS		
CITY - ST - ZIP		

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10**

TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	000000052875	
CITY - ST - ZIP	02/16/04-80105-023 66.25	
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY - ST - ZIP		
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY - ST - ZIP		
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY - ST - ZIP		

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 trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Rosario Falcon      DATE: 02/16/04      (305) 625-3620

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Daytime Phone #