

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 12, 2002 8:00 am
Secretary of State

05-12-2002 90635 014 ****61.25

DOCUMENT # 732592

1. Entity Name

LIGA CONTRA EL CANCER, INC.

Principal Place of Business

Mailing Address

(LEAGUE AGAINST CANCER, INC.)
 2180 SW 12 AVE.
 MIAMI FL 33129

(LEAGUE AGAINST CANCER, INC.)
 2180 SW 12 AVE.
 MIAMI FL 33129

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1629554

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PUPO, ROBERTO ESQUIRE
1221 BRICKELL AVENUE 24TH FLOOR
MIAMI FL 33131

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☒ Delete
 NAME VILLA, LUIS, M.D.
 STREET ADDRESS 3661 S MIAMI AVE #305
 CITY-ST-ZIP MIAMI FL

TITLE PD ☐ Change ☒ Addition
 NAME SUAREZ, George M., M.D.
 STREET ADDRESS 7000 SW 62ND AVENUE, #100
 CITY-ST-ZIP MIAMI, FL. 33133

TITLE SD ☒ Delete
 NAME ALONSO-MEMDOZA, EMILIO
 STREET ADDRESS 634 ALTARA AVE
 CITY-ST-ZIP CORAL GABLES FL

TITLE SD ☐ Change ☒ Addition
 NAME Pupo, Roberto, Esq.
 STREET ADDRESS 1111 BRICKELL AVE. 25th FLOOR
 CITY-ST-ZIP MIAMI, FL. 33131

TITLE TD ☐ Delete
 NAME MENENDEZ-ABRIL, SARAH
 STREET ADDRESS 200 SO BISCAYNE BOULEVARD #6896
 CITY-ST-ZIP MIAMI FL 33156

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE D ☐ Change ☒ Addition
 NAME RICARDO J. MARTINEZ
 STREET ADDRESS 11100 SW 62ND AVENUE
 CITY-ST-ZIP PINECREST, FL. 33156

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RICARDO J. MARTINEZ 4/21/02 856-4914

CR2E037 (9/01)