

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N15000008345

**Entity Name:** AFRO CUBAN FORUM INC**Current Principal Place of Business:**13719 NW 7 AVE  
MIAMI, FL 33168**Current Mailing Address:**6545 INDIAN CREEK DR APT 509  
MIAMI BEACH, FL 33141 US**FEI Number: 47-5164074****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ALBURQUERQUE, ANDRES  
13719 NW 7 AVE  
MIAMI, FL 33168 US*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:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Officer/Director Detail :**

Title	D,S
Name	GONZALEZ, RICARDO
Address	269 NW 7TH ST STE 117
City-State-Zip:	MIAMI FL 33136

Title	D,P
Name	ALBURQUERQUE, ANDRES
Address	6545 INDIAN CREEK DR APT 508
City-State-Zip:	MIAMI BEACH FL 33141

Title	D
Name	PATTERSON, ENRIQUE
Address	269 NW 7TH ST STE 117
City-State-Zip:	MIAMI FL 33136

Title	D
Name	ARRECHEA, SERGIO
Address	13910 SW 36 ST
City-State-Zip:	MIAMI FL 33175

Title	D
Name	DEL RIO, CLAUDIA
Address	5185 NW 29TH AVE APT 906
City-State-Zip:	MIAMI FL 33142

Title	D
Name	CABALLERO DOMINICO, RIQUET J
Address	13-6 SW 104 CT
City-State-Zip:	MIAMI FL 33174

Title	T
Name	CHARLES, BENSON
Address	13719 NW 7 AVE
City-State-Zip:	MIAMI FL 33168

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE: BENSON CHARLES****TREASURER****04/28/2017**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date