

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 03, 2003 8:00 am
Secretary of State

03-03-2003 90413 018 ****61.25

DOCUMENT # 713089

1. Entity Name

MUNICIPALITY OF MATANZAS IN EXILE, INC.



Principal Place of Business

**904 SW 23RD AVE
MIAMI FL 33135**

Mailing Address

**904 SW 23RD AVE
MIAMI FL 33135**

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 **NOT APPLICABLE**

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

**PEREZ, DEMETRIO, JR.
904 S.W. 23RD AVE.
MIAMI FL 33135**

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

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TD PEREZ, DEMETRIO JR. 904 S.W. 23 AVENUE MIAMI FL	☐		
VPD ESPINOSA, ROLANDO, DR. 130 SW 32 AVE. MIAMI FL	☐		
VPD BEOVIDES, MARIO 1751 SW 2ND AVE. MIAMI FL	☐		
SD BERTA, MILIAN 2500 S.W. 6TH STREET MIAMI FL	☐		
PD RODRIGUEZ, ENRIQUE 904 S.W. 23RD AVENUE MIAMI FL	☐		
	☐		

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:

SECRETARIES

1/8/03

CR2E037 (10/02)