

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

0012817

DOCUMENT # 722809

1. Entity Name
CIRCULO CUBANO DE TAMPA, INC.



FILED

03 NOV 18 AM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
2010 AVENIDA REPUBLICA DE CUBA
TAMPA FL 33605

Mailing Address
P O BOX 5625
TAMPA FL 33675
US

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State

City & State

Zip Country Zip Country

CHECK HERE IF MAKING CHANGES
FEE Number 59-1093645
 Applied For
 Not Applicable

6. Name and Address of Current Registered Agent

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

DIAZ, JORGE
2010 AVENIDA REPUBLICA DE CUBA
TAMPA FL 33605

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 DATE 11/12/03

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

FILE NOW: FEE IS \$61.25
After September 10, 2003, min will be \$236.25

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 P
NAME DIAZ, JORGE
STREET ADDRESS 2010 REPUBLICA DE CUBA
CITY-ST-ZIP TAMPA FL 33605

TITLE
NAME
STREET ADDRESS 600023416536
CITY-ST-ZIP 10/22/03--01004--001 **350.00

TITLE D
NAME LAVIN, RAUL
STREET ADDRESS 2010 REPUBLICA DE CUBA
CITY-ST-ZIP TAMPA FL 33605

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP 10/22/03--01004--001 **350.00

TITLE D
NAME MORELY, ELAINE
STREET ADDRESS 2010 AVENIDA REPUBLICA DE CUBA
CITY-ST-ZIP TAMPA FL 33605

TITLE
NAME
STREET ADDRESS 600023416536
CITY-ST-ZIP 09/30/03--01013--004--**61.25

TITLE D
NAME GONZALEZ, MARIO JR
STREET ADDRESS 2010 AVENIDA REPUBLICA DE CUBA
CITY-ST-ZIP TAMPA FL 33605

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D
NAME ~~BANNISTER, ROSS~~
STREET ADDRESS 2010 AVENIDA REPUBLICA DE CUBA
CITY-ST-ZIP TAMPA FL 33605

TITLE
NAME JAMY MAGRO
STREET ADDRESS 2010 AVENIDA REPUBLICA DE CUBA
CITY-ST-ZIP TAMPA, FL 33605

TITLE V
NAME DOSAL, PAUL
STREET ADDRESS 2010 REPUBLICA DE CUBA
CITY-ST-ZIP TAMPA FL 33605

TITLE
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

9/9/03 813 248 2954

CR2E037 (4/03)