## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Mar 03 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

Principal Place of Business

725287

(7)

Mailing Address

NATIONAL ASSOCIATION OF AGRONOMIC AND SUGAR ENGINEERS OF CUBA IN EXILE, INC.

6401-D SW 116 CT MIAMI FL. 33173-1735		C/O RAMON GOMEZ. CPA 782 NW 42 AVE. SUITE 447									
		MIAMI FL 33126-5549 US				3. Date Incorporated or Qualified 3a. Date of Last Report 01/16/1973 04/19/1996					
Principal Place of Business     2a. Mailing A			Address			4. FEI Number	<u> </u>		App	olied For	
21		26	····			59-2139182 Not Applicable					
Suite, Apt. (	#, etc.	Suite, Apt. #, etc.	<b>}-</b> ¬			5. Certificate of Status Desired  \$8.75 Additional					
22		27								duired	
City & State		City & State	28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees					
Zip 24	Country 25	Ζφ <b>29</b>	Country 30	У		6. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes X No					
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent						
			61	Ī	Name						
QUESAD 6401 SW	A, MIGUEL A.		82 Street Ad			address (P.O. Box Number is Not Acceptable)					
1	FL 33173		83	1							
			84	+	City		EI	85	Zip C	ode	
11. Pursuant to office or reagent. Lar	o the provisions of Sections 617, egistered agent, or both, in the Si m familiar with, and accept the of	0502 and 617, 1508, Florida Statut ate of Florida Such change was oligations of, Section 617,0503, Fl	les, the above authorized borida Statute	/e- ly I	named corporation	oration submits this statement for the proof on submits this statement for the proof of directors. I hereby accept	rpose of the appo	chang intmer	ing its	registered registered	
SIGNATURE _					<del></del>		DATE			······	
12.	Signature, typed or printed name of registered	AND DIRECTORS	13.	eni	t signature require	d when reinstating) ADDITIONS/CHANGES TO OFFIC		DIREC	TOR	S IN 12	
TITLE	P	DELETE	1.1 TITLE	-	P	7,0011010701741020 70 01110		Cha		☐ Addition	
NAME	PINO, ARTURO		1.2 NAME		-	ERRRERA, SILVIO R.			-		
STREET ADDRESS			1.3 STREE			540 S.W. 92ND PLACE					
CITY-ST-ZIP	MIAMI FL		1.4 CiTY -	st.		LAMI, FLORIDA 33165					
TITLE	1	☐ DELETE	2.1 TITLE		T			Cha	inge	☐ Addition	
NAME	BELTRAN, VIRGILLO E		2.2 NAME		\ \C/	ARRENO, PABLO A.				,	
STREET ADDRESS	12385 SW 22 TERRACE		2.3 STREE	ΪA	address 93	321 S.W. 69TH STREET					
CITY-ST-ZIP	MIAMI FL		2. 4 CITY -	-ST	r- ZIP <b>M</b>	IAMI, PLORIDA 33173					
TOTLE	\$	☐ DELETE	3.1 TITLE		S			Cha	ange	Addition	
NAME	DIAZ, RAFEAL		3.2 NAME			ONZALEZ, JOSE R.					
STREET ADDRESS	10915 SW 38TH ST		3.3 STREE	A F		243 S.W. 97TH COURT					
CITY - ST - ZIP	MIAMI FL		3.4. CITY-			IAMI, FLORIDA 33165		- 1 0		1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
THTLE	D	☐ DELETE	4.1 TITLE		D D	LONSO, JUAN	•	<b>▲</b> Cha	ange	Addition	
NAME	CARVAJAL, ARMANDO		4. 2 NAME	-			17				
STREET ADDRESS	8970 S.W. 4TH ST.		4.3 STREE		DOILOS DE	l070 S.W. 70TH TERRAC [AMI. FLORIDA 33173	E,				
CITY - ST - ZIP	MIAMI FL	DELETE	4.4 CITY-		. ZIP D	IAMI, FLORIDA 33173		Cha	2000	Addition	
TITLE	D D	☐ neresp	5.1 TITLE			RAVO, JORGE	•	BELL UTE	រ ម្ <del>រ</del> េ	T MODITION	
NAME	HERRERA, SILVIO		5.2 NAME			501 S.W. 109TH AVENUE					
STREET ADDRESS	2540 S.W. 92ND PLACE		5.3 STREE			IAMI, FLORIDA					
CITY-ST-ZIP TITLE	MIAMI FL	DELETE	5.4 CITY- 6.1 TITLE	_	- ZiP PLJ	TARIL, FINKINA	······································	<b>C</b> ha	anne	Addition	
NAME	DUEGADA MIGUELA		6.2 NAME		•	TECANA MICHIEL A	•	TALL UIK	a iga	Advitoil	
	QUESADA, MIGUEL A.		6.3 STREE		1 7	JESADA, MIGUEL A.					
STREET ADDRESS	6401 S.W. 116TH CT.		0.3 STHEE		NUNTEON   D4	101 S.W. 116TH COURT					

SIGNATURE: 2/17/47

14. I do 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 annual report or supplemental annual 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

MIAMI. FLORIDA