

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 725764 (5)

1. Corporation Name

ASSOCIATION OF SCOTTISH RITE MASONS OF CUBA IN E
XILE INC

Principal Place of Business

3631 SW 6TH ST.
MIAMI FL 33135 - 2520

Mailing Address

3631 SW 6TH ST.
MIAMI FL 33135



3. Date Incorporated or Qualified

03/08/1973

3a. Date of Last Report

03/16/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BEAMUD, JOSE I
3631 SW 6TH STREET
MIAMI FL 33135

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE

NAME BERMEOSOLO, RAFAEL
STREET ADDRESS 1770 S.W. 3RD ST. #7
CITY-ST-ZIP MIAMI FL 33135

1.1 TITLE PD ☒ Change ☐ Addition

1.2 NAME Maheo W. Hernandez
1.3 STREET ADDRESS 983 N.W. 51st Terf
1.4 CITY-ST-ZIP Miami, Fla. 33178

TITLE V ☐ DELETE

NAME HERNANDEZ, MAHEO
STREET ADDRESS 9883 N.W. 51ST TERRACE
CITY-ST-ZIP MIAMI FL 33178

2.1 TITLE V ☒ Change ☐ Addition

2.2 NAME Julio Chaviano
2.3 STREET ADDRESS 1764 N.W. 19th St
2.4 CITY-ST-ZIP Miami, Fla. 33125

TITLE SD ☐ DELETE

NAME GUSTAVO, PEREZ M
STREET ADDRESS 600 W. 29TH ST.
CITY-ST-ZIP HIALEAH FL 33010

3.1 TITLE ☐ Change ☐ Addition

TITLE VS ☐ DELETE

NAME JOSE E BELLO
STREET ADDRESS 871 SCOTT DR.
CITY-ST-ZIP WEST PALM BEACH FL

4.1 TITLE ☐ Change ☐ Addition

TITLE TD ☐ DELETE

NAME JOSE I BEAMUD
STREET ADDRESS 3631 S W 6TH STREET
CITY-ST-ZIP MIAMI FL

5.1 TITLE ☐ Change ☐ Addition

TITLE VT ☐ DELETE

NAME NICOLAS MAHY
STREET ADDRESS 2237 W 53RD ROAD
CITY-ST-ZIP HIALEAH FL

6.1 TITLE ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: JOSE I. BEAMUD

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

March 15, 1996 305-443-8858

Date

Daytime Phone #

CR2E037 (12/95)