2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 06, 2001 8:00 am
Secretary of State
09-06-2001 90265 050 ****70.00

DOCUMENT # 727508

1. Entity Name
ORGANIZACION DEMOCRATA PUERTORRIQUENA, INC.

Principal Place of Business	Mailing Address
GARCIA, FRANCISCO 4708 E 9th LANE MIAMI, FL 33013 US	PO BOX 650401 MIAMI, FL 33265-0401 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
PO BOX 832036	PO BOX 832036
Suite, Apt. #, etc.	Suite, Apt. #, etc.
MIAMI, FL	MIAMI, FL
Zip: 33283 Country: US	Zip: 33283 Country: US

4. FEI Number: 23-7431746 ☐ 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
ALICIA S. BARO 15760 SW 148 TERR MIAMI, FL 33196	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.

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

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
P Morgan, Ivette A. 8569 sw 115 PL Miami, FL 33143	☒ Delete	P Maldonado, Jacob 525 NW 27 Ave Miami, FL 33125	☒ Change ☐ Addition
D Baro, Alicia 15760 SW 148th TERR Miami, FL 33196	☐ Delete		☐ Change ☐ Addition
V Bermejo, Al 605 E 8th LN Hialeah, FL 33010	☐ Delete		☐ Change ☐ Addition
D Milagros Vallejo 10367 N Kendall Dr Unit E2 Miami, FL 33165	☒ Delete		☐ Change ☐ Addition
D Maldonado, Jacob 10705 SW 74 CT Miami, FL	☐ Delete	T/D Venegas, Norah 1400 Salzedo ST #401 Coral Gables, FL 33134	☒ Change ☐ Addition
D Santiago, Donna 151 E 17 ST Hialeah, FL 33010	☐ Delete		☐ Change ☐ Addition

CR2E037 (11/00)

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: JACOB MALDONADO, Pres. 08/28/2001 305-885-5000
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL (OFFICER OR DIRECTOR) Date Daytime Phone #

Attachment
D# 727508
B00644051

Jacob, 8/28/01
Please sign below
next to your name
as President * &
send the form with
the check in the
enclosed envelope
thank. Norah