


**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 12, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # 727668**  
 1. Entity Name  
**LITTLE HAVANA ACTIVITIES & NUTRITION CENTERS OF DADE COUNTY, INC.**



Principal Place of Business      Mailing Address  
 700 S.W. 8TH ST.                      700 S.W. 8TH ST.  
 MIAMI, FL 33130                      MIAMI, FL 33130



01052004 No Chg-NP CR2E037 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number      Applied For  
 23-7378008      Not Applicable

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

6. Name and Address of Current Registered Agent  
 RAMON PEREZ, DORBECKER  
 700 S.W. 8TH ST.  
 MIAMI, FL 33130

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

**Filing Fee is \$61.25 Due by May 1, 2004**

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

10. OFFICERS AND DIRECTORS

|                |                     |
|----------------|---------------------|
| TITLE          | CD                  |
| NAME           | TORANO, RAUL        |
| STREET ADDRESS | 700 S.W. 8TH STREET |
| CITY- ST- ZIP  | MIAMI, FL 33130     |
| TITLE          | VCD                 |
| NAME           | PEREIRA, SERGIO     |
| STREET ADDRESS | 700 SW 8TH ST       |
| CITY- ST- ZIP  | MIAMI, FL           |
| TITLE          | SD                  |
| NAME           | BORGES, LUIS        |
| STREET ADDRESS | 700 SW 8TH STREET   |
| CITY- ST- ZIP  | MIAMI, FL 33130     |
| TITLE          | VSD                 |
| NAME           | MARRERO, MANUEL     |
| STREET ADDRESS | 700 SW 8TH ST       |
| CITY- ST- ZIP  | MIAMI, FL 33130     |
| TITLE          | TD                  |
| NAME           | SABATER, CARLOS A   |
| STREET ADDRESS | 700 S.W. 8TH STREET |
| CITY- ST- ZIP  | MIAMI, FL           |
| TITLE          |                     |
| NAME           |                     |
| STREET ADDRESS |                     |
| CITY- ST- ZIP  |                     |

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 01/13/04-80045-006 70.00

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: *Ramon Perez Dorbecker*      1/8/04  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #