FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED

95 MAY -1 AM 11:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 732036 (9)

1. Corporation Name

REAL ESTATE LATIN ASSOCIATION, INC.

Principal Place of Business	Mailing Address
P.O. BOX 350158 MIAMI FL 33135-0158	P.O. BOX 350158 MIAMI FL 33135-0158

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/03/1975
3a. Date of Last Report: 08/01/1994
4. FEI Number: 59-1656088 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

AGUILERA, GUIDO A., ESQ.
815 PONCE DE LEON #200
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

01 Name
02 Street Address (P.O. Box Number is Not Acceptable)
03
04 City FL 05 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	11 TITLE	P	☒ Change ☐ Addition
NAME	ISIDRO, JUAN V.	12 NAME	ROIG, ENNA RODRIGUEZ	
STREET ADDRESS	1913 SW 3RD AVE.	13 STREET ADDRESS	7951 40th ST. STE 208	
CITY-ST-ZIP	MIAMI FL	14 CITY-ST-ZIP	MIANI, FL.	
TITLE	V	21 TITLE	V	☒ Change ☐ Addition
NAME	ROIG, ENNA RODRIGUEZ	22 NAME	CADI, JOSE	
STREET ADDRESS	7951 SW 40TH ST., STE. 208	23 STREET ADDRESS	8150 SW 8th ST. STE 217	
CITY-ST-ZIP	MIAMI FL	24 CITY-ST-ZIP	MIAMI, FL.	
TITLE	T	31 TITLE		☐ Change ☐ Addition
NAME	DE MOLINA, MARIA GOMEZ	32 NAME		
STREET ADDRESS	1221 BRICKELL AVE., STE. 1820	33 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL	34 CITY-ST-ZIP		
TITLE	S	41 TITLE		☐ Change ☐ Addition
NAME	SEBASTIAN, JOAQUIN	42 NAME		
STREET ADDRESS	1345 LINCOLN RD., STE. 903	43 STREET ADDRESS		
CITY-ST-ZIP	MIAMI BCH. FL	44 CITY-ST-ZIP		
TITLE	D	51 TITLE		☐ Change ☐ Addition
NAME	DAIRE, ALBERTO	52 NAME		
STREET ADDRESS	7175 SW 8TH ST., STE. 210	53 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL	54 CITY-ST-ZIP		
TITLE	D	61 TITLE	D	☒ Change ☐ Addition
NAME	GOMEZ, MICHAEL C.	62 NAME	ESTEVAN, ERNESTO O.	
STREET ADDRESS	2245 SW 90TH AVE.	63 STREET ADDRESS	1140 W. 50 ST. STE. 207	
CITY-ST-ZIP	MIAMI FL	64 CITY-ST-ZIP	HIALEAH, FL.	

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)(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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Jose Cadi V. PRES. 4/27/95 267-9845
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone #

0041848