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NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #Corporation Name

(6)

FRATERNIDAD MARTIANA, INC.

FILED

Feb 24 1998 8:00am

Secretary of State

Mailing Address Principal Place of Business 1770 SW 3 ST., APT. #7 1770 SW 3 ST., APT. #7 3. Date Incorporated or Qualified MIAMI FL 33135 MIAMI FL 33135 12/31/1975 4. FEI Numbe Applied For <u>59-1751550</u> Not Applicable 2. Principal Place of Business 2a. Mailing Address \$8.75 Additional 5. Certificate of Status Desired 21 26 Fee Required Suite, Apt. #, etc. Suite, Apt. #, etc. 6. Election Campaign Financing \$5.00 May Be 22 27 Trust Fund Contribution Added to Fees City & State City & State 7. Is this nonprofit corporation a homeowners association? 23 28 Yes No Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Same BEAMUD, JOSE I. 82 Street Address (P.O. Box Number is Not Acceptable) 3631 SW 6TH STREET 83 **MIAMI FL 33135** Same 84 City 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature regulard when reinstaling) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13.

SIGNATURE 12. TITLE DELETE 1.1 TITLE Change NAME DOMINGUEZ, LUIS F. 1.2 NAME STREET ADDRESS 7530 S.W. 30TH TERRACE 1.3 STREET ADDRESS Same CITY-ST-ZIP MIAMI FL 1.4 CITY-ST-ZIP DELETE 2.1 TITLE ☐ Change ☐ Addition NAME MARQUEZ, SECUNDINO I. 2.2 NAME Same STREET ADDRESS 1146 S.W. 6TH ST. #6 2.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition BEAMUD, JOSE I. 3.2 NAME STREET ADDRESS 3631 SW 6TH ST. Same 3.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME ACOSTA, JORGE ALVAREZ 4. 2 NAME STREET ADDRESS 13501 SW 38 STREET 4.3 STREET ADDRESS Same CITY-ST-ZIP MIAMI FL 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change Addition NAME SILVIO, MARTINEZ 5.2 NAME STREET ADDRESS 12401 OKEECHOBEE RD. #75 Same 5.3 STREET ADDRESS CITY-ST-ZIP HIALEAH FL 5.4 CITY-ST-ZIP DELETE Change TITLE 6.1 TITLE ___ Addition NAME BERMEOSOLO, RAFAEL 62 NAME STREET ADDRESS 1770 S.W. 3RD ST. #7 6.3 STREET ADDRESS Same

CITY-ST-ZIP MIAMI FL 64 CITY-ST-ZIP 14. 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 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 phangod, or on an attachnyont with an address.

2-15-98