

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 27, 2006 8:00 am
Secretary of State

03-27-2006 90276 021 ****70.00

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1. Entity Name

ASOCIACION DE ESPIRITUANOS EN EL EXILIO, INC.



Principal Place of Business

Mailing Address

4501 PALM AVE
STE #104
HIALEAH FL 33012
US

P.O. BOX 350974
RIVERSIDE STATION
MIAMI FL 33135
US



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

59-1847803

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

RODRIGUEZ & URIARTE TAX SERVICE
4501 PALM AVE
STE 104
HIALEAH FL 33012

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. I am familiar with and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

MARIO D RODRIGUEZ
DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
NAME GARCIA, REGELIO
STREET ADDRESS 1465 W 42ND PLACE #109
CITY-ST-ZIP HIALEAH FL 33012

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE SD ☒ Delete
NAME SASTRE, LUIS
STREET ADDRESS 12824 SW 74 TERR
CITY-ST-ZIP MIAMI FL 33183-3413

TITLE VPD ☒ Change ☐ Addition
NAME GERARDO J. MEMDI BURT
STREET ADDRESS 11122 SW 143RD COURT
CITY-ST-ZIP MIAMI, FL 33186

TITLE SD ☒ Delete
NAME SASTRE, LUIS A
STREET ADDRESS 12824 SW 74 TERR
CITY-ST-ZIP MIAMI FL 33183

TITLE SD ☒ Change ☐ Addition
NAME MAYRA DIAZ-MENESES
STREET ADDRESS 4855 N.W. 7 ST APT 210
CITY-ST-ZIP MIAMI FL 33126

TITLE PD ☒ Delete
NAME GARCIA, ROGELIO
STREET ADDRESS 1465 W 42 PL #109
CITY-ST-ZIP HIALEAH FL 33012

TITLE VTD ☒ Change ☐ Addition
NAME RAMON BARREIRO
STREET ADDRESS 17931 NW 79 AVENUE
CITY-ST-ZIP MIAMI, FL 33015

TITLE VSD ☐ Delete
NAME FERNANDEZ, MARTHA
STREET ADDRESS 1865 JF KENNEDY CAYSEWAY
CITY-ST-ZIP N BAY VILLAGE FL 33141

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TD ☐ Delete
NAME FONS, ADAN
STREET ADDRESS 15261 SW 30TH TER
CITY-ST-ZIP MIAMI FL 33185

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: *Rogelio Garcia* (Rogelio Garcia)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #