

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 746843

FILED
Jul 15, 2010
Secretary of State

Entity Name: MUNICIPALITY OF GUANE IN EXILE, INC.

Current Principal Place of Business:

3620 SW 60 AVENUE
MIAMI, FL 33155

New Principal Place of Business:

Current Mailing Address:

3620 SW 60 AVENUE
MIAMI, FL 33155

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SUAREZ, ANTONIO E TREASUR
3620 SW 60 AVENUE
MIAMI, FL 33155 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: P
Name: FLORES, LEONILA P
Address: 1525 TREVINO AVE
City-St-Zip: CORAL GABLES, FL 33134

Title: T
Name: SUAREZ, ANTONIO E T
Address: 3620 SW 60 AVENUE
City-St-Zip: MIAMI, FL 33155

Title: S
Name: YUT, PAULA N S
Address: 8811 FOUNTAINBLEAU BLVD. #203
City-St-Zip: MIAMI, FL 33172

Title: VS
Name: CRUZ, FEDERICO VS
Address: 11443 SW 7 TERRACE
City-St-Zip: MIAMI, FL 33174

Title: VP
Name: INVIERNO, CELEDONIO VP
Address: 493 EAST 30 ST
City-St-Zip: HIALEAH, FL 33013

Title: VT
Name: MARTIN, ALFREDO VT
Address: 3425 SW 78 CT.
City-St-Zip: MIAMI, FL 33155

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: SUAREZ, ANTONIO E.

T

07/15/2010

Electronic Signature of Signing Officer or Director

Date