2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2004 08:00 AM
Secretary of State

DOCUMENT # 750529

1. Entity Name
MUNICIPIO DE MARIANAO EN EL EXILIO, INCORPORATED

Principal Place of Business	Mailing Address
6071 SW 114 COURT MIAMI, FL 33173	6071 SW 114 COURT MIAMI, FL 33173

DO NOT WRITE IN THIS SPACE

03312004 No Chg-NP CR2E037 (10/03)

4. FEI Number
NOT APPLICABLE ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

LLACA, ZENIA G.
6071 SW 114 CT
MIAMI, FL 33173

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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

000000105752
04/07/04-80038-006 61.25

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	GAMERO, ZENIA
STREET ADDRESS	6071 SW 114 COURT
CITY-ST-ZIP	MIAMI, FL 33173
TITLE	V
NAME	GAMERO, MARIA
STREET ADDRESS	3880 W. 6TH AVE.
CITY-ST-ZIP	HIALEAH, FL 33012
TITLE	SD
NAME	LLACA, ZENIA G
STREET ADDRESS	6071 SW 114 COURT
CITY-ST-ZIP	MIAMI, FL 33173
TITLE	TD
NAME	LLACA, FRANK G
STREET ADDRESS	6071 SW 114 COURT
CITY-ST-ZIP	MIAMI, FL 33173
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. 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 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: [signature] ZENIA G. LLACA APRIL 5, 2004 305-596-2218
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #