

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2005 08:00 AM
Secretary of State

DOCUMENT # 750529

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



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

Mailing Address
**6071 SW 114 COURT
MIAMI, FL 33173**



03022005 No Chg-NP

CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

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**

**DO NOT WRITE
IN THIS SPACE**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**PD
GAMERO, ZENIA
6071 SW 114 COURT
MIAMI, FL 33173**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**V
GAMERO, MARIA
3880 W. 6TH AVE.
HIALEAH, FL 33012**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**SD
LLACA, ZENIA G
6071 SW 114 COURT
MIAMI, FL 33173**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**TD
LLACA, FRANK G
6071 SW 114 COURT
MIAMI, FL 33173**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**000000317894
04/20/05-80037-003 61.25**

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:

Zenia Gamero **PRESIDENT**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-16-05

305-274-3926

Date

Daytime Phone #