

**2004 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 30, 2004 08:00 AM
Secretary of State

DOCUMENT # 750768

1. Entity Name
**FEDERACION DE PELOTEROS PROFESIONALES
CUBANOS, INC.**



Principal Place of Business
**3601 S.W. 87 COURT
MIAMI, FL 33165**

Mailing Address
**3601 S.W. 87 COURT
MIAMI, FL 33165**

DO NOT WRITE IN THIS SPACE



03212004 No Chg-NP CR2E037 (10/03)

4. FEI Number
59-2029636

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**HEVIA, JOSE R
3601 SW 87 COURT
MIAMI, FL 33165**

**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)

**Filing Fee is \$61.25
Due by May 1, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

000000142005
04/30/04-80034-022 61.25

10. OFFICERS AND DIRECTORS

| | |
|----------------|------------------------|
| TITLE | P |
| NAME | LLANES, ARMANDO |
| STREET ADDRESS | 11862 SW 37 TERR |
| CITY- ST- ZIP | MIAMI, FL 33122 |
| TITLE | D |
| NAME | GARMENDIA, OSCAR |
| STREET ADDRESS | 9340 W FLAGLER ST #102 |
| CITY- ST- ZIP | MIAMI, FL 33175 |
| TITLE | D |
| NAME | HEVIA, JOSE R |
| STREET ADDRESS | 3601 S.W. 87 COURT |
| CITY- ST- ZIP | MIAMI, FL 33165 |
| TITLE | D |
| NAME | FLEITAS, ANDRES |
| STREET ADDRESS | 14765 SW 47 TERRACE |
| CITY- ST- ZIP | MIAMI, FL 33176 |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY- ST- ZIP | |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY- ST- ZIP | |

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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)(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: *Jose R. Hevia*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #