

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 15, 2008 8:00 am
Secretary of State

05-15-2008 90022 029 ****70.00

DOCUMENT # 757102

1. Entity Name
CABAIGUAN CLUB OF FLORIDA, INC.



Principal Place of Business

**C/O MANUEL PEREZ-PADILLA
181 CRANDON BLVD #207
KEY BISCAYNE, FL 33149**

Mailing Address

**C/O MANUEL PEREZ-PADILLA
181 CRANDON BLVD #207
KEY BISCAYNE, FL 33149**

40102472



04222008 No Chg-NP

CR2E037 (4/06)

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4. FEI Number

59-2089992

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**PEREZ-PADILLA, MANUEL
181 CRANDON BLVD APT 207
KEY BISCAYNE, FL 33149**

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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, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

TITLE	S
NAME	CASTELLANOS, NILDA
STREET ADDRESS	195 PENNANA DRIVE
CITY-ST-ZIP	HIALEAH, FL 33010
TITLE	VD
NAME	CARMONA, JORGE
STREET ADDRESS	8735 SW 52 ST
CITY-ST-ZIP	MIAMI, FL 33165
TITLE	PD
NAME	CANEJA, PABLO
STREET ADDRESS	7028 W 4 LANE
CITY-ST-ZIP	HIALEAH, FL 33014
TITLE	TD
NAME	MARTINEZ, NARIA <i>→ S/B MARIA</i>
STREET ADDRESS	251 CRANDON BLVD APT 435
CITY-ST-ZIP	KEY BISCAYNE, FL 33149
TITLE	VS
NAME	CANEJA, ISABEL
STREET ADDRESS	7028 W 4 LANE
CITY-ST-ZIP	HIALEAH, FL 33014
TITLE	VT
NAME	GARIFA, MIGUEL
STREET ADDRESS	91 TOT LOCHE
CITY-ST-ZIP	HIALEAH, FL 33010

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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

Manuel A. Martinez

04/25/08