

FILE NOW: FILING FEE IS \$61.25

**FILED**  
**Feb 22, 1999 8:00 am**  
**Secretary of State**

02-22-1999 90127 031 \*\*\*\*61.25

0032208

**NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # 759348**

1. Corporation Name

**ASOCIACION DE CAZADORES CUBANOS, INC.**

Principal Place of Business

**7300 S.W. MILLER DR  
MIAMI FL 33155**

Mailing Address

**7300 S.W. MILLER DR  
MIAMI FL 33155**



2. Principal Place of Business

**21** Suite, Apt. #, etc.

**22** City & State

**23** Zip

**25** Country

2a. Mailing Address

**26** Suite, Apt. #, etc.

**27** City & State

**28** Zip

**30** Country

3. Date Incorporated or Qualified  
**07/28/1981**

4. FEI Number  
**59-2205179**

Applied For  
☐ Not Applicable

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

6. Election Campaign Financing ☐ **\$5.00** May Be Added to Fees

9. Name and Address of Current Registered Agent

**ARANGO, FRANZ A  
7300 S.W. MILLER DR  
MIAMI FL 33155**

10. Name and Address of New Registered Agent

**81** Name

**82** Street Address (P.O. Box Number is Not Acceptable)

**83**

**84** City

**FL**

**85** Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

**PD** ☒ DELETE  
**MARIANO, MARCIAS**  
**4918 S.W. 74 CT**  
**MIAMI FL 33155**

**VPD** ☒ DELETE  
**LEGORBORU, ANTONIO**  
**9701 S.W. 96 CT.**  
**MIAMI FL 33176**

**SD** ☐ DELETE  
**ARANGO, FRANZ**  
**7300 S.W. MILLER DR**  
**MIAMI FL 33155**

**TD** ☐ DELETE  
**SUAREZ, MIGUEL**  
**3301 S.W. 110 CT**  
**MIAMI FL 33165**

☐ DELETE

☐ DELETE

13.

**DD** ☒ Change ☐ Addition  
**ALBERTO SOLARES**  
**7625 N.W. 54<sup>th</sup> ST**  
**MIAMI, FL 33166**

**VPD** ☒ Change ☐ Addition  
**JOHN ALEXANDER**  
**5825 S.W. 99<sup>th</sup> Terr.**  
**MIAMI FL 33156**

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**Signature Required**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**1-6-99 (305) 663-8678**

Date

Daytime Phone #

CR2E037 (1/98)