

FILE NOW: FILING FEE IS \$61.25

FILED

Jan 31 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 760663 (5)

1. Corporation Name

LIGA ECUATORIANA DE FLORIDA INC

Principal Place of Business

12227 S.W. 132ND COURT
MIAMI FL 33186

Mailing Address

12227 S.W. 132ND COURT
MIAMI FL 33186-6480

2. Principal Place of Business

21

Suite, Apt. #, etc.

22 City & State

23

Zip Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip Country

29

30

3. Date Incorporated or Qualified

11/10/1981

3a. Date of Last Report

06/24/1996

4. FEI Number

59-1102060

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes☐ Yes☐ No

9. Name and Address of Current Registered Agent

VALERO, MARTHA F
8899 D S.W. 133RD COURT
MIAMI FL 33186

10. Name and Address of New Registered Agent

81 Name

CECILIA BARRAQUE

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

7380 N. AUGUSTA DRIVE

83

84 City

MIAMI

FL

85 Zip Code

33015

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, of 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

TITLE D ☐ DELETENAME KING, GUSTAVO
STREET ADDRESS 4216 S.W. 154 COURT
CITY-ST-ZIP MIAMI FL 33186TITLE D ☐ DELETENAME BARRAQUE, CECILIA
STREET ADDRESS 7280 N. AUGUSTA DRIVE
CITY-ST-ZIP MIAMI FL 33015TITLE D ☐ DELETENAME ONA, BETTY
STREET ADDRESS 7801 S.W. 148 AVENUE
CITY-ST-ZIP MIAMI FL 33193TITLE D ☐ DELETENAME GUEVARA, JAIME
STREET ADDRESS 10942 S.W. 153 AVENUE
CITY-ST-ZIP MIAMI FL 33196TITLE ☐ DELETENAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ DELETENAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D ☐ Change ☐ Addition1.2 NAME CECILIA BARRAQUE
1.3 STREET ADDRESS 7380 N. AUGUSTA DRIVE
1.4 CITY-ST-ZIP MIAMI, FL 330152.1 TITLE D ☐ Change ☐ Addition2.2 NAME SEGUNDO A. RUGEL
2.3 STREET ADDRESS 6860 MCCLELLAN STREET
2.4 CITY-ST-ZIP HOLLYWOOD, FL 330253.1 TITLE ☐ Change ☐ Addition3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP4.1 TITLE ☐ Change ☐ Addition4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP5.1 TITLE ☐ Change ☐ Addition5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP6.1 TITLE ☐ Change ☐ Addition6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0027934

CR2E037 (9/96)