

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
Apr 09, 1999 8:00 am
Secretary of State

04-09-1999 90079 022 ****70.00

DOCUMENT # 767125

1. Corporation Name

MUNICIPIO DE HOLGUIN EN EL EXILIO, ORIENTE, CUBA
, INC.

Principal Place of Business

C/O EMILIO OCHOA
3300 S. DIXIE HIGHWAY #506
MIAMI FL 33133

Mailing Address

C/O EMILIO OCHOA
3300 S. DIXIE HIGHWAY #506
MIAMI FL 33133



2. Principal Place of Business

21 C/O CARY COMPAIN

2a. Mailing Address

26 C/O CARY COMPAIN

Suite, Apt. #, etc.

22 331 TAMAMI CANAL DR

Suite, Apt. #, etc.

331 TAMAMI CANAL DR

City & State

23 MIAMI, FLA

City & State

28 MIAMI, FLA

Zip

24 33144

Country

25 U.S.A.

Zip

29 33144

Country

30 U.S.A.

3. Date Incorporated or Qualified

02/23/1983

4. FEI Number

26-5844453

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional

Fee Required

6. Election Campaign Financing ☐

Trust Fund Contribution

\$5.00 May Be

Added to Fees

9. Name and Address of Current Registered Agent

OCHOA, ONELIA
3300 S. DIXIE HIGHWAY #506
MIAMI FL 33133

10. Name and Address of New Registered Agent

81 Name

CARY COMPAIN

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

331 TAMAMI CANAL DR

83

84 City

MIAMI

FL

85 Zip Code

33144

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

Cary Compain

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

(NOTE: Registered Agent signature required when reinstating)

DATE

3/20/99

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE
NAME OCHOA, ONELIA
STREET ADDRESS 3020 N.W. 16TH STREET
CITY-ST-ZIP MIAMI FL 33125

TITLE D ☒ DELETE
NAME ROJAS, LUIS FELIPE
STREET ADDRESS 6775 S.W. 27 STREET
CITY-ST-ZIP MIAMI FL 33155

TITLE D ☐ DELETE
NAME OCHOA, EMILIO
STREET ADDRESS 3300 S. DIXIE HWY., #506
CITY-ST-ZIP MIAMI FL 33133

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DIRECTOR ☐ Change ☒ Addition
1.2 NAME JOSE DE LA PEÑA
1.3 STREET ADDRESS 7015 SW 16 TERR.
1.4 CITY-ST-ZIP MIAMI, FL 33155

2.1 TITLE DIRECTOR ☐ Change ☒ Addition
2.2 NAME JOAQUIN AGUIRRE
2.3 STREET ADDRESS 10361 SW 20 ST
2.4 CITY-ST-ZIP MIAMI, FL 33165

3.1 TITLE DIRECTOR ☐ Change ☒ Addition
3.2 NAME ELEANA GONGORA
3.3 STREET ADDRESS 1750 W 46 ST #417
3.4 CITY-ST-ZIP HIALEAH, FL 33012

4.1 TITLE DIRECTOR ☐ Change ☒ Addition
4.2 NAME HAYDEE AGUILERA
4.3 STREET ADDRESS 1228 WEST AVE #906
4.4 CITY-ST-ZIP MIAMI BEACH

5.1 TITLE DIRECTOR ☐ Change ☒ Addition
5.2 NAME HECTOR PALOMO
5.3 STREET ADDRESS 1040 SW 143 CT
5.4 CITY-ST-ZIP MIAMI, FL 33184

6.1 TITLE DIRECTOR ☐ Change ☒ Addition
6.2 NAME PEDROM. PEÑARANDA
6.3 STREET ADDRESS 2800 SW 117 CT
6.4 CITY-ST-ZIP MIAMI, FL 33175

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

3/20/99 (305) 261-3357
Date Daytime Phone #