

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 23, 2003 8:00 am
Secretary of State

01-23-2003 90063 031 ****61.25

DOCUMENT # 827767

1. Entity Name

IAPA PRESS INSTITUTE, INC.



Principal Place of Business

**1801 SW 3RD AVE
8TH FL
MIAMI FL 33129**

Mailing Address

**1801 SW 3RD AVE
8TH FL
MIAMI FL 33129**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **13-1963541**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MUNOZ, JULIO E
1801 SW 3RD AVE
8TH FL
MIAMI FL 33129**

Name

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

City

FL

Zip Code

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

JULIO E. MUNOZ, EXECUTIVE DIRECTOR

1/17/03

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
MESQUITA, JULIO C.F. DE
AV. CAETANO ALVARES, 55
SAO PAULO BR** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PRESIDENT
KRAISELBURD, RAUL
DIAGONAL 80 N° 815/21
LA PLATA, ARGENTINA** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
FERRE, LUIS A.
REY RICARDO 392
GUAYNABO PR 00969** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
ALEMAN, EDUARDO
EL CARABOBENO
VALENCIA VE** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VICE PRESIDENT
BRUGMANN, BRUCE
135 MISSISSIPPI STREET
SAN FRANCISCO, CA 2536** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
ZUCOLILLO, ALDO
YEGROS 745
ASUNCION, PARAGUAY** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
BRUGMANN, BRUCE
520 HAMPSHIRE ST
SAN FRANCISCO CA 94110** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**ADAMS, DAVID
490 1st AVE. N./ PO BOX 1121
ST. PETERSBURG, FL 33701/ 33731** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
MUNOZ, JULIO E
7100 SW 146TH ST
MIAMI FL 33158** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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: JULIO E. MUNOZ, EXECUTIVE DIRECTOR 1/17/03 305-634-2465

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/02)