FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 AM 5:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L98222 (7)

1. Corporation Name

ASOCIACION NACIONAL DE GANADEROS DE CUBA (EXILIO), INC.

Principal Place of Business: ~~P. O. BOX 43-2642 MIAMI FL 33243-2642 US~~ DELETE

Mailing Address: ~~P. O. BOX 43-2642 MIAMI FL 33243-2642 US~~ DELETE

DO NOT WRITE IN THIS SPACE

3. Date of Incorporation or Qualification: 09/04/1990	3a. Date of Last Report: 05/18/1994
4. FEI Number: 65-0254095	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
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business: 21 6141 S.W. 17th St.	2a. Mailing Address: 26 P.O.BOX 0946
Suite, Apt. #, etc.: 22 MIAMI, FL	Suite, Apt. #, etc.: 27 MIAMI, FL 33144-0946
City & State: 23	City & State: 28
Zip: 24 33155 Country: 25 USA	Zip: 29 33144 Country: 30 USA

9. Name and Address of Current Registered Agent

ARAN, FERNANDO S
710 SOTH DIXIE HIGHWAY
CORAL GABLES FL 33146

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 607.0502 and 617.0502, 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 607.0505, Florida Statutes.

SIGNATURE ______ DATE ______

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title	DV	Title	DP ☐ Change ☒ Addition
Name	RIERA, ARTURO J	Name	RICARDO R. SARDINA
Street Address	4600 SW 12 ST	Street Address	9022 S.W. 123 rd. CT. APT. O-310
City-St-Zip	MIAMI FL	City-St-Zip	MIAMI, FL 33186
Title	~~DT~~	Title	DT ☐ Change ☒ Addition
Name	~~ROGELIO GOMEZ~~ DELETE	Name	RODRIGO RODRIGUEZ
Street Address	~~5764 S.W. 54 TERR~~	Street Address	6141 S.W. 17th STREET
City-St-Zip	~~MIAMI FL~~	City-St-Zip	MIAMI, FL 33155
Title	DS	Title	☐ Change ☐ Addition
Name	SECADA, ANGELY	Name	
Street Address	13705 SW 13 ST	Street Address	
City-St-Zip	MIAMI FL	City-St-Zip	
Title	~~DP~~	Title	☐ Change ☐ Addition
Name	~~ROSE, HENRY~~ DELETE	Name	
Street Address	~~13920 SW 106 ST~~	Street Address	
City-St-Zip	~~MIAMI FL~~	City-St-Zip	
Title	DV	Title	☐ Change ☐ Addition
Name	BETANCOURT, ROBERTO E	Name	
Street Address	325 SW 81 AVE	Street Address	
City-St-Zip	MIAMI FL	City-St-Zip	
Title		Title	☐ Change ☐ Addition
Name		Name	
Street Address		Street Address	
City-St-Zip		City-St-Zip	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(1)(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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-28-95 Date

0431476 FP