

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 28, 2004 08:00 AM
Secretary of State

DOCUMENT # N00000008222

1. Entity Name

CUMBRE PATRIOTICA DEL PRESIDIO POLITICO
CUBANO, INC.



Principal Place of Business

1177 NW 105 TERRA
MIAMI, FL 33150

Mailing Address

1177 NW 105 TERRA
MIAMI, FL 33150

DO NOT WRITE IN THIS SPACE



07232004 No Chg-NP

CR2E037 (10/03)

4. FEI Number

65-1061454

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PEREZ, SERVILIO
1177 NW 105 TERRA
MIAMI, FL 33150

**DO NOT WRITE
IN THIS SPACE**

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

Servilio Perez

Signature, typed or printed name of registered agent and title of corporation

(NOTE: Registered Agent signature required when re-registering)

7/21/2004

DATE

Filing Fee is \$61.25
Due by September 8, 2004

9. Election Campaign Financing
Trust Fund Contribution.



\$5.00 May Be
Added to Fees.

10. OFFICERS AND DIRECTORS

TITLE	DD
NAME	PEREZ, SERVILIO
STREET ADDRESS	1177 NW 105 TERRA
CITY-ST-ZIP	MIAMI, FL 33150
TITLE	D
NAME	HERNANDEZ, FELIPE
STREET ADDRESS	1177 NW 105 TERRA
CITY-ST-ZIP	MIAMI, FL 33150
TITLE	T
NAME	MAZO, RODOLFO
STREET ADDRESS	484 E. 46TH ST
CITY-ST-ZIP	HALEAH, FL 33150
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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07/28/04-80005-007 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 179(07.001), 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:

Servilio Perez

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/21/2004 305-693-9633

DATE

Device Phone #