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

FILED
Apr 28, 2003 8:00 am
Secretary of State
03-26-2003 90179 032 ****69.00

DOCUMENT # N00000008339

1. Entity Name
CENTRO DE ESTUDIOS ESPECIALES SOBRE LATINOAMERICA Y EL CARIBE, INC.

Principal Place of Business	Mailing Address
436 NE 35 TERRACE MIAMI FL 33137	2121 PONCE DE LEON BLVD 240 CORAL GABLES FL 33134

CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
438 NE 35 TERR Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: MIAMI FL	City & State
Zip: 33137 Country	Zip Country

4. FEI Number 65-1072518 ☐ 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
MARIN, HAYDEE 3910 S.W. 4TH STREET MIAMI FL 33134	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 _____
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	PD LUSINCHI, JAIME 3550 BISCAYNE BLVD., STE. 304 MIAMI FL 33137	☒ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD LUSINCHI, BLANCA 3550 BISCAYNE BLVD., STE. 304 MIAMI FL 33137	☐ Delete	PD DE LUSINCHI, BLANCA 21011 NE 38 AVE AVENTURA FL 33180	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT MARIN, HAYDEE 3910 S.W. 4TH ST. MIAMI FL 33134	☒ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	VP D MARTIN, RAFAEL 430 NE 35 TERR MIAMI, FL 33137	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	T D MARIN, LEONOR 3910 SW 4 ST MIAMI FL 33134	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	S D GARCIA, LORENA 430 NE 35 TERR MIAMI FL 33137	☐ Change ☒ Addition

CR2E037 (10/02)

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: S/G Required 03.24.03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #