

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

**FILED**  
**Jan 06, 2003 8:00 am**  
**Secretary of State**

01-06-2003 90020 013 \*\*\*\*70.00

**DOCUMENT # NO1000000082**

1. Entity Name

**THE INTERNATIONAL SWIMMING AND CULTURAL FOUNDATION, INC.**



Principal Place of Business

1480 E. SAMPLE RD., #202  
POMPANO BEACH FL 33064

Mailing Address

1480 E. SAMPLE RD., #202  
POMPANO BEACH FL 33064

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-1062496**

Applied For

Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**ZUBERO, DAVID L**  
1480 E. SAMPLE RD., #202  
POMPANO BEACH FL 33064

7. Name and Address of New Registered Agent

Name **MARTIN L. Zubero**  
Street Address (P.O. Box Number is Not Acceptable)  
**1480 E. Sample Rd. #202**  
City **Pompano Beach** FL Zip Code **33064**

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>ZUBERO, MARTIN L</b> <b>465 FORESTWAY CIRCLE, #104</b> <b>ALTAMONTE SPRINGS FL 32701</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VTM</b> <b>ZUBERO, DAVID L</b> <b>2109 NE 45 ST</b> <b>ST AUGUSTINE FL 32080</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>DONOVAN, ELIZABETH</b> <b>11 D'AYALLON AVENUE</b> <b>ST AUGUSTINE FL 32080</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>ZUBERO, JULIA L</b> <b>13013 MULBERRY PARK DR., APT. #23</b> <b>ORLANDO FL 32821</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>POBLETE, SUSANA</b> <b>1623 COLLINS AVE., #1014</b> <b>MIAMI BEACH FL 33139</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>LOPEZ, JOSE LUIS</b> <b>POSTAL FERNANDEZ LONDON 980, DEPT. 513</b> <b>SANTIAGO, CHILE SA</b>	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>Martin Zubero, MARTIN L.</b> <b>1480 E. Sample Rd. #202</b> <b>Pompano Beach, FL 33064</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VTM</b> <b>Zubero, David L.</b> <b>2109 N.E. 45th St</b> <b>St. Landersdale, FL 33308</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>Zubero, Julia L.</b> <b>2605 Tradewinds Trail</b> <b>ORLANDO, FL 32805</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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:

**MARTIN L. Zubero**  
**DIRECTOR**

1/6/2003 954-783-2006

CR2E037 (10/02)