

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

FILED
May 07, 2002 8:00 am
Secretary of State

05-07-2002 90245 025 ****70.00

DOCUMENT #

1. Entity Name

US/CUBA LEGAL FORUM, INC.

NO1000002015

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

201 S. Biscayne Blvd

Suite, Apt. #, etc.

Suite 2500

City & State

Miami, FL

Zip

33131

Country

USA

3. Mailing Address

201 S. Biscayne Blvd

Suite, Apt. #, etc.

Suite 2500

City & State

Miami, FL

Zip

33131

Country

USA

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4. FEI Number

01-063-4290

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Antonio Zamora

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

201 S. Biscayne Blvd Suite 2500

City

Miami

FL

Zip Code
33131

**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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FEE IS \$61.25
Initial or Amended UBR

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
Jose M. Palli
9700 S. Dixie Highway Ste 930
Miami, FL 33156

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
Jesus Sanchelima
235 S. LeJeune Road
Miami, FL 33134

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
Antonio Zamora
201 S. Biscayne Blvd Ste 2500
Miami, FL 33131

TITLE
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IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]

Director

4-24-02