

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

FILED
Mar 17, 2003 8:00 am
Secretary of State

02-26-2003 90152 001 ****61.25

DOCUMENT # N02000005219

1. Entity Name

CUBAN VOLUNTEER GROUP CORPORATION



Principal Place of Business

POST OFFICE BOX 6545
MIAMI FL 33122

Mailing Address

POST OFFICE BOX 6545
MIAMI FL 33122

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number

01-0771587

Applied For
Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ARDOIS, LUIS F
10304 N.W. 9 STREET CIRCLE
SUITE #102
MIAMI FL 33172

7. Name and Address of New Registered Agent

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 re-registering)

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	PD PONZOA, GUSTAVO C 3025 S.W. 83RD COURT MIAMI FL 33185	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MEDELL, ROBERTO 7003 WATERWAY DRIVE #213 MIAMI FL 33155	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD ARDOIS, LUIS F 10304 NW 9 STREET CIRCLE #102 MIAMI FL 33172	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addit
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(2)(b), 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 the name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

Luis Ardois March 14, 2003