

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002854

FILED
May 23, 2005
Secretary of State

Entity Name: THE JOSE MARTI COMMEMORATIVE COMMISSION, INC.

Current Principal Place of Business:

904 SW 23RD AVE
MIAMI, FL 33135

New Principal Place of Business:

Current Mailing Address:

904 SW 23RD AVE
MIAMI, FL 33135

New Mailing Address:

FEI Number: 20-0909669 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

DEMETRIO J. PEREZ & ASSOCIATES, P.A.
904 SW 23RD AVE
STE 200
MIAMI, FL 33135 US

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ESPINOSA, ROLANDO
Address: 130 SW 32ND AVE
City-St-Zip: MIAMI, FL 33135

Title: VP () Delete
Name: PEREZ, DEMETRIO JR
Address: 904 SW 23RD AVE
City-St-Zip: MIAMI, FL 33135

Title: ST () Delete
Name: SPINOSA, ARMINDA
Address: 130 SW 32ND AVE
City-St-Zip: MIAMI, FL 33135

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ESPINOSA, ROLANDO
Address: 904 SW 23 AVE
City-St-Zip: MIAMI, FL 33135

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: ST (X) Change () Addition
Name: MARI, ARMINDA
Address: 904 SW 23 AVE
City-St-Zip: MIAMI, FL 33135

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DEMETRIO PEREZ

VP

05/23/2005

Electronic Signature of Signing Officer or Director

Date