2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # N05000007158 *

1. Entity Name

CITY-ST-7IP

SIGNATURE:

MIAMI, FL 33131

THE NICARAGUA CIVIC LEAGUE INC.

FILED Apr 30, 2007 08:00 A Secretary of State

Principal Place of Business

Mailing Address

601 BRICKELL KEY DR SUITE 201 MIAMI, FL 33131 601 BRICKELL KEY DR SUITE 201 MIAMI, FL 33131



01032007 No Chg-NP

CR2E037 (4/06)

4. FEJ Number 20-3158164 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GUTIERREZ, RENALDY J 601 BRICKELL KEY DR SUITE 201 MIAMI, FL 33131

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	named entity submits this statement for the plans of registered agent.	urpose of changing its registered	affice or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title if	appecable (NOTE Registered A	gent signature	required when reinstating)	DATE
	Filing Fee is \$61.25 Due by May 1, 2007	Election Campaign Financia Trust Fund Contribution.	ng 🗆	\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS				·	
TITLE NAME STREET ADDRESS CITY-ST-2IP	DP MONTALVAN, MARCELO 601 BRICKELL KEY DR SUITE 201 MIAMI, FL 33131				Unnonnavonea
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV TERAN, ROGER 601 BRICKELL KEY DR SUITE 201 MIAMI, FL 33131				000000748267 05/17/07-80056-025 61.25
TITLE NAME STREET ADDRESS CITY-SI-ZIP	DV HERDOCIA, JORGE U 601 BRICKELL KEY DR SUITE 201 MIAMI, FL 33131			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV GALLO, CARLOS 601 BRICKELL KEY DR SUITE 201 MIAMI, FL 33131			IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT CHAMORRO, ARTURO 601 BRICKELL KEY DR SUITE 201 MIAMI, FL 33131				
TITLE NAME STREET ADDRESS	DS TERAN, JOSE F 601 BRICKELL KEY DR SUITE 201				

12. I hereby certify that the information supplied with this time does not qualify for the exemptions contained in Chapter 119, 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 of the receiver or trusted 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.