

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mathern
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N07235

(7)

1. Corporation Name

EDITORIAL CUBANA, INC.

61 21
FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
01/17/1985

3a. Date of Last Report
02/07/1994

4. FEI Number
59-2603589

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status ☒

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

Principal Place of Business

Mailing Address

500 SW 127 AVE.
MIAMI FL 33184

500 SW 127 AVE.
MIAMI FL 33184

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RASCO, JOSE IGNACIO
500 SW 127 AVE.
MIAMI FL 33184

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	DP
NAME	BOTIFOLL, LUIS J.
STREET ADDRESS	500 S.W. 127 AVENUE
CITY - ST - ZIP	MIAMI FL
TITLE	DS
NAME	RASCO, JOSE IGNACIO
STREET ADDRESS	500 S.W. 127 AVENUE
CITY - ST - ZIP	MIAMI FL
TITLE	D
NAME	JORGE, GUILLERMO
STREET ADDRESS	500 S.W. 127 AVENUE
CITY - ST - ZIP	MIAMI FL
TITLE	DVP
NAME	MARCELINO, GARCIA S.J.
STREET ADDRESS	500 S.W. 127TH AVE.
CITY - ST - ZIP	MIAMI FL
TITLE	DVP
NAME	ALEJANDRE, A. ARMANDO
STREET ADDRESS	500 S.W. 127TH AVE.
CITY - ST - ZIP	MIAMI FL
TITLE	DT
NAME	ABELLA, ANTONIO
STREET ADDRESS	500 S.W. 127TH AVE.
CITY - ST - ZIP	MIAMI FL

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13, if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan 23 1995 (305)

Date

Signature Printed Name