

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 28, 2001 8:00 am
Secretary of State

04-28-2001 90013 026 ****70.00

DOCUMENT # N10411

1. Entity Name

ASAMBLEA PROVINCIAL DE LA HABANA EN EL EXILIO, I

Principal Place of Business

3503 SW 6TH ST.
MIAMI FL 33135

Mailing Address

3503 SW 6TH ST.
MIAMI FL 33135
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2566367

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GOMEZ, ROBERTO PEREDA
3503 SW 6TH ST
MIAMI FL 33135

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

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
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Delete
NAME BRITO, JOSE M
STREET ADDRESS 5033 NW 7TH ST #206
CITY-ST-ZIP MIAMI FL 33126

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE P ☒ Delete
NAME SANCHEZ, DAGOBERTO
STREET ADDRESS 3551 W 74TH PL
CITY-ST-ZIP HIALEAH FL 33016

TITLE P ☒ Change ☐ Addition
NAME NARDO, JUAN A.
STREET ADDRESS 911 Venetia Ave.
CITY-ST-ZIP Coral Gables, FL 33134

TITLE D ☒ Delete
NAME PEREDA GOMEZ, ROBERTO
STREET ADDRESS 3503 SW 6TH ST
CITY-ST-ZIP MIAMI FL 33135

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE T ☐ Delete
NAME HERNANDEZ, IVAN
STREET ADDRESS 100300 SW 24TH ST APT D-31
CITY-ST-ZIP MIAMI FL 33165

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE SD ☐ Delete
NAME HURTADO, NELLY
STREET ADDRESS 290 E 39TH STREET
CITY-ST-ZIP HIALEAH FL 33013

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE PD ☒ Delete
NAME SANCHEZ, SIMON A
STREET ADDRESS 4634 SW 10TH ST
CITY-ST-ZIP MIAMI FL 33144

TITLE VP ☒ Change ☐ Addition
NAME Enriquez, Francisco
STREET ADDRESS 444 SW 27 Ave. # 23
CITY-ST-ZIP Miami, FL 33135

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Ivan E. Hernandez Hernandez,

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-20-2001 (305)-441-9085

Date

Daytime Phone #

CR2E037 (10/00)