FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

N14875

(1)

JEFATURA MILITAR CONJUNTA BRIGADA 2506, INC.

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Principal Place of Business		Mailing Address			
1017 S.W. 137 CT. MIAMI FL 33184		1017 S.W. 137 CT. Miami Fl 33184			3. Date Incorporated or Qualified
US		US			05/12/1986
1					4. FEI Number Applied For
2. Principal Place of Business 2a. Mailing Address					65-0035866 Not Applicable
21 26					5. Certificate of Status Desired
Suite, Apt. #, etc.		Suite, Apt. #, etc.			6. Election Campaign Financing \$5.00 May Be
22 27					Trust Fund Contribution Added to Fees
City & State City & State		⊢ <i>'</i>			7. Is this nonprofit corporation a homeowners association?
Zip	<u></u>		Country		8. This corporation owes or has paid the current year Intangible
24	25				Personal Property Tax due June 30.
9. Name and Address of Current Registered Agent				T	10. Name and Address of New Registered Agent
			81	Name	
HIDALGO GATO, ELISEO			82	Street	Address (P.O. Box Number is Not Acceptable)
1017 S.W. 137 CT. MIAM! FL \$3184			83	 	
MINAMIF	L 33104			<u> </u>	
			84	,	FL 85 Zip Code
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.					
agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.					
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE					
Signature, typed or printed name of registered agent and title if applicable (NOTE: 12. OFFICERS AND DIRECTORS			Registered Ag	ent signature	e required when reinstaling) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	VPD OF FIGURE AND	DELETE	1.1 TITLE	PD	HIDALGO GATO, ELISEO Change Addition
NAME	SOTO, MIGUEL		1.2 NAME		1017 S.W. 137 Ct.,
STREET ADDRESS	7940 BILTMORE BLVD.		1.3 STREE	T ADDRESS	Miami, Fl., 33184
CITY-ST-ZiP	MIAMI FL 33023		1.4 CITY - 1	ST-ZIP	
TITLE	SD	☐ DELETE	2.1 TITLE		SD Change Addition
NAME	ROJA, ELDA		2.2 NAME		ROJA, ELDA
STREET ADDRESS	920 S.W. 2 ST. APT. #2			address	920 S.W. 2 St., APt. #2
CITY-ST-ZIP	MIAMI FL 33144	□ potent	2.4 CITY+ST-ZIP		Miami, FL., 33130
TITLE	PD HIDALGO GATO, ELISEO	L DELETE	3.1 TITLE		VPD
NAME STREET ADDRESS	1017 S.W. 137 CT.		3.2 NAME	T ADDRESS	Rubio, Jose F.
CITY-ST-ZIP	MIAMI FL 33184		l e		900 S.W. 10 Terr.,
TITLE	VPD	DELETE	3.4. CITY+ST-ZIP 4.1 TITLE		Miami, FL., 33130
NAME	RUBIO, JOSE F		4. 2 NAME		
STREET ADDRESS	900 S.W. 10 TR.		4.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33174		4.4 CITY-ST-ZIP		
TITLE	VPD	DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	ARROYO, MANUEL	,	5.2 NAME		
STREET ADDRESS	2220 S.W. 129 AVE.		5.3 STREE	T ADDRESS	
CITY-ST-ZIP	MIAMI FL 33174		5.4 CITY - ST - ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET		
CITY-ST-ZIP	affily that the information supplied w	ith this filing does not qualify for	6.4 CITY-S		ed in Section 119.07(3)(i), Florida Statutes. I further certify that the information
THE PROPERTY C	romy mat the intermediation supplied w	an and ming does not quality for t	TIO OVOING	MOII SIGN	so in Section 1 18-07 (O(1), 1 long Statutes, 1 third Deliver Ball the House Bull 1

• I nereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attactiment with an address.

SIGNATURE:

Set Flee Holab Cobis - 10.98

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FILED

Jun 18 1998 8:00am

Secretary of State

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