## **2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)**

## **DOCUMENT # N30219**

1. Entity Name



## **FILED** Apr 03, 2003 8:00 am Secretary of State 04-03-2003 90197 014 \*\*\*\*61.25

CENTRO	DE LA DEMOCRACIA CUBANA	, INC.							01.23	
Principal Place 8261 NW 64 S MIAMI FL 3316 US		Mailing Address 8261 NW 64 ST MIAMI FL 33166 US	<b>1</b>		E I GERILIĞI GOD ILI	II 88138 (1886 11838	1831 <b>61813 213</b> 1) 1	<b>                                   </b>	<b>1</b> 12 <b>313</b> 12 1 <b>03</b> 2	
2. Principal F 2801	Place of Business PONCE DELEEN	3. Mailing Address 280 i Ponce	De Lec	٧,ر	a a a a a a a a a a a a a a a a a a a					
Suite, Apt.		Suite Apt. #, etc.	تـــــــــــــــــــــــــــــــــــــ	-		HECK HERE	F MAKING.			
City & Sta	AL GABLES	City & State CORAL 6A	BLES		4. FEI Number 65	-0106642		_	pplied For lot Applicable	
33 <sup>Zip</sup> 134	Country F/A	33134	Couptry/A		5. Certificate of Sta	atus Desired		8.75 Ac ee Requir		
	6. Name and Address of Current F	Registered Agent			7. Name and Add	ress of New R	egistered Aç	jent		
			Name							
FERNANDEZ, LINO B 2801 PONCE DE LEON, STE 410			Street A	Street Address (P.O. Box Number is Not Acceptable)						
CORAL G	GABLES (EL 33134	•								
			City				FL	Zip Co	de	
	e named entity submits this statement for	the purpose of changing its re	egistered office o	r registere	ed agent, or both, in t	the State of Flo	rida. I am fa	miliar with	, and accept	ľ
the obliga	itions of registered agent.									
										ĺ
SIGNATURE	•					<del> </del>				
SIGNATURE	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE:	Registered Agent signat	ture required	when reinstating)		DATE -			
	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE:				Mal		Payable	to	
			paign Financing		when reinstating) \$5.00 May Be Added to Fees		DATE			   
	Signature, typed or printed name of registered agent a	9. Election Camp Trust Fund Co	paign Financing		\$5.00 May Be	Florid	ke Check la Departn	nent of	State	
10. TITLE	FILE NOW: FEE IS \$61.25  OFFICERS AND DIR	9. Election Camp Trust Fund Co	paign Financing ontribution.		\$5.00 May Be Added to Fees	Florid	ke Check la Departn	nent of	State	(20)/
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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: