1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## FILED Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90027 031 \*\*\*\*61.25

## DOCUMENT # N30423

1. Corporation Mame	_
EL YAYABO SOFTBALL CLUB INC	
LE MINDO CONTONEE CECO III	
/	
Principal Place of Business	Mailing Address
4510 MALAN AUTY 5 - 6 11 11 19/3	4. ACON DAIN AME ( "7/1/1/1) 1264407
1 4513/79EN AVE 674 NIV. 126	C. SMITE AND THE 6/4 NOW 120
4513 PALM AVE 674 N.1). 1267 HUMEAN FL 33012 MIRMIT 72.	HALFAHAFI 33012 MALANA
33182	4505 PALM AVE 674 N.W 126 20 9 90 17 10 126 20 9 11 12 10 12
115.	•••
	2a. Mailing Address
2. Principal Place of Business	2a. Mailing Address 26 674 N.W. 126 4.C.
21 674 NW. 126 74 C7	· 26 614 N.W. 126 C
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State	City & State
23 1/1/1/1/1/1/2	28 / / / / /// //-
Zip Country	Zip Country
24 33/82 25 ANDE	29 33/82 30 DNDE

3. Date Incorporated or Qualifed

5. Certifcate of Status Desired

01/31/1989 4. FEI Number

65-0076722

23 / ////	28 / 7 / \ / /					
Zip 3=3 (	Country Zip	Country DE	6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added to	· ·	
24 53/4		<u> </u>	10. Name and Address of New Registered	Agent		
9. Name and Address of Current Registered Agent  81 Name						
RODRIGUE	ez, mario d	82 Street	Acidress (P.O. Box Number is Not Acceptable)	<u>`</u>	•	
4501 PALM AVE			14 N.W. 126 -0	/ ·		
SUITE 104						
HIALEAH F	FL 33012	84 City	MIAM FL	85 Zip (	ode 1/82	
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 approximent as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.						
SIGNATURE LOKUL Maria KAFAGI F. BARRA LADIL 20199						
12.	Signature, the or printed name of registered agent and title if applicable. (NOT 2: R)  OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	ND DIRECTO	FIS IN 12	
TITLE	PD SELETE	1.1 TITLE		Change	☐ Addition	
NAME	DELGADO, JULIO M	1.2 NAME	111111111111111111111111111111111111111	- 10		
STREET ADDRESS	7135 COLLINS AVE, UNIT 1001	1.3 STREET ADDRESS	5801 HARDING AVE APT	3/8	i	
CITY-ST-ZIP	MIAMI BEACH FL	1.4 CITY-ST-ZIP	FARTANDO DEL SOL  1964 WEST 29 WM	7/		
TITLE	VPD □ DELETE	2.1 TITLE VRS	FRMANDO DEL SOL	Change	Addition	
NAME.	DUARTE, JOSE M.	2.2 NAME	6964 WEST 29 WAY			
STREET ADDRESS	12740 S.W. 50TH TERRACE	2.3 STREET ADDRESS	HIALEAH, FE. 33016		ļ	
CITY-ST-ZIP	MIAMI FL	2.4 CITY-ST-ZIP		Change	Addition	
TITLE	10	3.1 TITLE	3	(F) Change	The state of	
NAME	MONTAGNE, MEIQUIADES G.	3.2 NAME	NSONE CHESTATO			
STREET ADDRESS	1410 PONCE DE LEON BLVD.	3.3 STREET ADDRESS 3.4. CITY-ST-ZIP	OSCAC CALDENIN 1198 DEST 415 STREET- HIDLEAN, TZ. 33012			
CITY-ST-ZIP	CORAL GABLES FL  SD DELETE	4.1 TITLE	175	Change	Addition	
NAME	BORREGA, CARLOS	4. 2 NAME	The control of the co	_		
STREET ADDRESS	10528 SW 69TH TERR	4.3 STREET ADDRESS	1465 WEST 42 1 AL	7		
CITY-ST-ZIP	MIAMI FL	4.4 CITY-ST-ZIP	HIALEPH, FZ			
TITLE	VTD M DELETE	5.1 TITLE		Change	Addition	
NAME	RODRIGUEZ, MARIO D	5.2 NAME	RAFARE F. BARNA			
STREET ADDRESS	4513 PALM AVE	5.3 STREET ADDRESS	1374 M.W. 125 C/			
CITY-ST-ZIP	HIALEAH FL	5.4 CITY-ST-ZIP	MIANI, 12. 33182			
TITLE	VD\$ PDELETE	6.1 TITLE	CARLUS BORREGO		Addition	
NAME	BORGES, JULIO	6.2 NAME	11578 510.69 TERR	?		
STREET ADDRESS	13371 SW 41ST LANE	6.3 STREET ADDRESS	MIAM, Fz. 33173			
CITY-ST-ZIP	MIAMI FL	6.4 CITY-ST-ZIP	1.1/4/1/ / Z. 00.1			

14. 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 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 attact ment with an address, with all other like empowered.

SIGNATURE:

Applied For

✓ Not Applicable \$8.75 Additional