

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 PM 1:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N02461 (P)

1. Corporation Name

Respetable Logia Simbolica Hijos de Cuban No 24
Inc.

Principal Place of Business

Mailing Address

521 N.W. 12th Avenue
Miami, FL 33136

Non Profit

DO NOT WRITE IN THIS SPACE.

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 9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Soto Vicente E.
6501 Harbor Rd.
N Lauderdale FL 33068

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 the if applicable

(NOTE: Registered Agent signature required when terminating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME Gomez Aguedo D
STREET ADDRESS 420 N.E. 18th Court
CITY - ST - ZIP Ft. Lauderdale FL 33354

1.1 TITLE T
12 NAME EFRAIN DURANZA
13 STREET ADDRESS 10431 NW 2nd CT
14 CITY - ST - ZIP PLANTATION, FL 33324

TITLE D
NAME Ruiz Eloy M. V
STREET ADDRESS 6502 S.W. 18TH Court
CITY - ST - ZIP Pompano FL 33068

2.1 TITLE
22 NAME
23 STREET ADDRESS
24 CITY - ST - ZIP

TITLE D
NAME Castellan Carlos S
STREET ADDRESS 5264 N.E. 4TH Ave.
CITY - ST - ZIP Ft. Lauderdale FL 33334

3.1 TITLE
32 NAME
33 STREET ADDRESS 700001489617
34 CITY - ST - ZIP -05/17/95--01006--003
*****70.00 *****70.00

TITLE T
NAME Soto Vicente E. T
STREET ADDRESS 6501 Harbor Rd.
CITY - ST - ZIP N. Lauderdale FL 33068

4.1 TITLE
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP

TITLE T
NAME Lazaro G. Langston P
STREET ADDRESS 3770 N.E. 16TH Terrace
CITY - ST - ZIP Pompano Beach, FL 33064

5.1 TITLE
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

6.1 TITLE
62 NAME
63 STREET ADDRESS
64 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)(k), 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 607, 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

4-18-95 (305) 969-1503

Date

Typed Name