

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION ANNUAL REPORT 1995



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

APPROVED
95 MAY - 1 10 10:03
7 00 00 00 00 00

DOCUMENT # N33368 (4)
1 Corporation Name

PUERTO RICAN AMERICAN CLUB, INC.

Principal Place of Business Mailing Address

P.O. BOX 6346 SPRING HILL, FL 34606 P.O. BOX 6346 SPRING HILL, FL 34606

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 07/24/1989 3a. Date of Last Report 04/29/1994

4. FEI Number 59-2967371 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status \$68.75 Supplemental Fee Not Required

8. This corporation has liability for intangible tax under S. 109.032, Florida Statutes Yes No

21 Principal Place of Business 2a. Mailing Address

22 Suite, Apt. #, etc. 27 Suite, Apt. #, etc.

23 City & State 28 City & State

24 7a Country 25 Country 29 Zip 30 Country

9. Name and Address of Current Registered Agent

RIVERA, ARIEL
4099 SUGARFOOT DR.
SPRING HILL, FL 34606

10. Name and Address of New Registered Agent

B1 Name

B2 Street Address (P.O. Box Number is Not Acceptable)

B3

B4 City FL B5 Zip Code

I, Pursuant to the provisions of Sections 617.0502 and 617.1808, 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]* ARIEL RIVERA - PRESIDENT 4/10/95
DATE

12 OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	11 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	RIVERA, ARIEL	12 NAME	100001809321
STREET ADDRESS	4099 SUGARFOOT DR.	13 STREET ADDRESS	-06/02/95--01025--002
CITY-ST-ZIP	SPRING HILL, FL 34606	14 CITY-ST-ZIP	***138.75 ***138.75
TITLE	VD	21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VELEZ, ALEXANDER	22 NAME	
STREET ADDRESS	240 E. EARLY ST.	23 STREET ADDRESS	
CITY-ST-ZIP	BROOKSVILLE, FL 34601	24 CITY-ST-ZIP	
TITLE	SD	31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VELEZ, EVELYNDA	32 NAME	
STREET ADDRESS	240 EARLY ST.	33 STREET ADDRESS	
CITY-ST-ZIP	BROOKSVILLE, FL 34601	34 CITY-ST-ZIP	
TITLE	TD+	41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WILFREDO MORALES	42 NAME	
STREET ADDRESS	13515 BONITA AVE.	43 STREET ADDRESS	
CITY-ST-ZIP	SPRING HILL, FL 34609	44 CITY-ST-ZIP	
TITLE	SD	51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	YOLAIDA RUBIO	52 NAME	
STREET ADDRESS	1336 PIPER RD.	53 STREET ADDRESS	
CITY-ST-ZIP	SPRING HILL, FL 34606	54 CITY-ST-ZIP	
TITLE	TD	61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DENNISE CORREA	62 NAME	
STREET ADDRESS	1450 GREENVIEW AVE.	63 STREET ADDRESS	
CITY-ST-ZIP	SPRING HILL, FL 34606	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 119.07(3)(b), 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 attachment with an address.

SIGNATURE: *[Signature]* ARIEL RIVERA 4/10/95 (904) 683-2264
DATE

AS FOR CONVERSATION WITH ARIEL RIVERA ON 3-31-95