FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State
DIVISION OF CORPORATIONS

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUL 25 AM 8:09

DOCUMENT # N42261 (0)

1. Corporation Name

CUMBRE PATRIOTICA CUBANA CORP.

Principal Place of Business	Mailing Address
KEYS CO 1301 00 68 ST #E4 HIALEAH FL 33183 US	12919 S.W. 59TH TERRACE MIAMI FL 33183

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/25/1991
3a. Date of Last Report: 05/01/1994
4. FEI Number: 65-0285654 ☐ 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. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 1140 SW 13 AVE	26 CUMBRE PATRIOTICA CUBANA
Suite, Apt. #, etc. 22 MIAMI FLORIDA	Suite, Apt. #, etc. 27 1140 SW 13 Ave
City & State 23 33135 DADE	City & State 28 MIAMI FLORIDA
Zip / Country 24 / 25	Zip / Country 29 33135 / 30 DADE

9. Name and Address of Current Registered Agent

CASTANER, MODESTO L
14260 SW 71 LN
MIAMI FL 33183

10. Name and Address of New Registered Agent

81 Name: Luis Rodriguez
82 Street Address (P.O. Box Number is Not Acceptable): 3720 NW 2 TER
83
84 City: Miami FL 85 Zip Code: 33126

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: x Luis Rodriguez — 7/12/95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PSD	11 TITLE	☒ Change ☐ Addition
NAME	CASTANER, MODESTO	12 NAME	PSD
STREET ADDRESS	12919 S.W. 59TH TERRACE	13 STREET ADDRESS	Luis Rodriguez
CITY-ST-ZIP	MIAMI FL 33183	14 CITY-ST-ZIP	3720 NW 2 TER Miami FL 33126
TITLE	VDT	21 TITLE	☐ Change ☐ Addition
NAME	LINARES, JOSE PEREZ	22 NAME	
STREET ADDRESS	1361 SW 124 CT.	23 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33184	24 CITY-ST-ZIP	
TITLE	VDT	31 TITLE	☐ Change ☐ Addition
NAME	LUISA, GARCIA-TOLEDO	32 NAME	
STREET ADDRESS	9130 S.W. 134TH PLACE	33 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33186	34 CITY-ST-ZIP	
TITLE	TD	41 TITLE	☒ Change ☐ Addition
NAME	POZO, ROBERTO	42 NAME	TD
STREET ADDRESS	21642 S.W. 100TH PLACE	43 STREET ADDRESS	JOSE VICTORERO
CITY ST ZIP	MIAMI FL 33190	44 CITY ST ZIP	2200 NW 12 Ave MIAMI FL 33127
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		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)(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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: x Luis Rodriguez — 7/12/95 — 305 6423806
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0045037