

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 06, 2005 8:00 am
Secretary of State

05-06-2005 90096 022 ****70.00

DOCUMENT # N44878

1. Entity Name

YAGUAJAY SOCIAL CLUB 91 CORP.



Principal Place of Business

**1020 NW 34 AVE.
MIAMI FL 33125**

Mailing Address

**1020 NW 34 AVE.
MIAMI FL 33125**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0330577

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BRACERAS, FERMIN, JR.
1020 NW 34 AVE.
MIAMI FL 33125**

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	VAZQUEZ, FROILAN	
STREET ADDRESS	3824 SW 79TH AVE UNIT 111	
CITY- ST- ZIP	MIAMI FL 33155	
TITLE	D	<input type="checkbox"/> Delete
NAME	LEIVA, ARNALDO	
STREET ADDRESS	3961 W 8TH AVE	
CITY- ST- ZIP	HIALEAH FL 33012	
TITLE	D	<input type="checkbox"/> Delete
NAME	BRACERAS, FERMIN	
STREET ADDRESS	1020 NW 34TH AVE	
CITY- ST- ZIP	MIAMI FL 33125	
TITLE	D	<input type="checkbox"/> Delete
NAME	LOPEZ, ANTONIO	
STREET ADDRESS	1300 W 53RD #37	
CITY- ST- ZIP	HIALEAH FL 33012	
TITLE	D	<input type="checkbox"/> Delete
NAME	DIZ, LUIS	
STREET ADDRESS	515 W 46TH PL	
CITY- ST- ZIP	HIALEAH FL 33012	
TITLE	D	<input type="checkbox"/> Delete
NAME	DELGADO, ELSA	
STREET ADDRESS	4250 NW 200 ST	
CITY- ST- ZIP	CORAL CITY FL	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

DIEGO GUSTAVO LOPEZ ☒ Change ☐ Addition
6320 E 4TH AVE
HIALEAH FL 33013

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:

Fernando Bracer

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-30-05

Date

305 358 6804

Daytime Phone #