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Mailing Address

P.O. BOX 351081

MIAMI FL 33135

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N51220

Principal Place of Business

920 NW 24TH COURT

MIAMI FL 33125

PARTIDO SOCIAL REVOLUCIONARIO DEMOCRATICO INC.

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						<u>, , , , , , , , , , , , , , , , , , , </u>
2. Principal P	ace of Business	2a. Mailing Address			3. Date Incorporated or Qualifed	•
21		26			10/05/1992	· · · · · · · · · · · · · · · · · · ·
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			4. FEI Number	Applied For
22		27			65-0364551	Not Applicable
City & Stat	9	City & State			5. Certificate of Status Desired	\$8.75 Additional
23		28				Fee Required
Zip	Country	Zip	Cour	try	6. Election Campaign Financing	\$5.00 May Be
24	25	29	30		Trust Fund Contribution	Added to Fees
	9. Name and Address of Curren	nt Registered Agent			10. Name and Address of New Registered	Agent
				81 Name		
SIMEON, ROBERTO				82 Street Add	ress (P.O. Box Number is Not Acceptable)	
920 NW 24TH CT			Ĺ			
MIAMI FL			İ	B3		
			ŀ	84 City		85 Zip Code
			ļ			. `
11. Pursuant	to the provisions of Sections 617.050	2 and 617.1508, Florida Stati	utes, the ab	ove named cor	poration submits this statement for the purpose of	changing its registered
office or n	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida, Such change was ations of, Section 617,0503, Fl	aumonzeo Iorida Statu	by the corporati les.	ion's board of directors. I hereby accept the appo	illulent as registered
_	and consequently and consequently	,			•	
SIGNATURE	Signature, typed or printed name of registered ager	ant and title if applicable. (NOT	TE: Registered	gent signature require		
12.	OFFICERS AN	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	
TITLE	D	DELETE	1.1 गार	E 🍞		☐ Change ☐ Addition
NAME	FERNANDEZ, MANUEL		1.2 NA	Æ ∫	Val 5 Joyge 9785 SW 123 Terr	
STREET ADDRESS	1654 N.W. 35 STREET		1.3 STF	EET ADDRESS	9785 SW 1237err	
CITY-ST-ZIP	MIAMI FL		1.4 CIT	Y-ST-ZIP	miami. FLA.	
TITLE	D	☐ DELETE	2.1 ₹∏\		a lanto	Change
NAME	SIMEON, ROBERTO		2.2 NA	AE 🗐 🗲	meon, Roberto	•
STREET ADDRESS	920 NW 24TH COURT		2.3 STF	EET ADORESS 9	120 NW 24 CT MIDMI FL 33125	
CITY-ST-ZIP	MIAMI FL 33125		2. 4 CIT	Y-ST-ZIP		
TITLE	D	☐ DELETE	3.1 TIT	E	ア ニーニー	: Change Addition
NAME	VALLS, JORGE		3.2 NA	AE Z	CARBBALLO, KOLONDO	
STREET ADDRESS	9785 SW 123 TERR		3.3 STF	REET ADDRESS	CARBBALLO, Rolando 5821 SW 147 CT	
CITY-ST-ZIP	MIAMI FL	_	3,4. CIT	Y-ST-ZIP	n/A. FL. 33/37	<u> </u>
TITLE	D	■ DELETE	4.1 TITI			Change Addition
NAME	CASAS, JOSE A.		4, 2 NA	ME	• .	
STREET ADDRESS	10340 SW 53RD ST		4.3 STF	REET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33165		4.4 CIT	Y-ST-ZIP		<u> </u>
TITLE		☐ DELETE	5.1 113			Change Addition
NAME			5.2 NA	i i	•	
STREET ADDRESS			5.3 ST	REET ADDRESS		
			5.4 CIT	Y-ST-ZIP		* *
CITY-ST-ZIP		□ DELETE	6.1 TIT			☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

SIGNATURE:

NAME

STREET ADDRESS CITY-ST-ZIP

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 attachment with an address, with all other like empowered.

FILED

Mar 05, 1999 8:00 am Secretary of State

03-05-1999 90079 015 ****61.25