## **2001 UNIFORM BUSINESS REPORT (UBR)**

## FILED Jan 25, 2001 8:00 am Secretary of State DOCUMENT # N9400000845 1. Entity Name CUBAN NATIONAL HERITAGE CORP. 01-25-2001 90112 009 \*\*\*\*61.25 Principal Place of Business Mailing Address 300 ARAGON AVE 300 ARAGON AVE UUUUUTDJJ 260 CORAL GABLES FL 33134 CORAL GABLES FL 33134 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 65-0468553 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) COBELO, ARMANDO F 300 ARAGON AVE 260 Zin Code MIAMI FL 33134 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 1-13-2001 ARMANDO F. COBELO SIGNATURE and title if applicable FILE NOW: 9. Election Campaign Financing Make Check Payable to \$5.00 May Be П Trust Fund Contribution. FEE IS \$61.25 Added to Fees **Department of State** 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TIT! F TITLE Delete Change Addition ALBERTO S. BUSTAMANTE NAME CABARROCAS, DAVID NAME STREET ADDRESS 4086 EL PRADO BLVD STREET ADDRESS 2512 PERSHING DAKS PLACE CiTY-ST-ZIP **COCONUT GROVE FL 33133** CITY-ST-ZIP ORLANDO FL 32806 TITLE ☐ Delete TITLE Change M Addition LOURDES A. QUIRCH NAME COBELO, ARMANDO F NAME STREET ADDRESS 1400 SW 84TH COURT STREET ADDRESS 7540 BW 52 CT CITY-ST-ZIP CÎTY-ST-ZIP MIAMI FL 33144 MIAMI FL 33143 TITLE Delete TITLE ☐ Change ☐ Addition CASANOVA, SALOME NAME NAME STREET ADDRESS 650 OCEAN LN DR APT 10D STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **KEY BISCAYNE FL 33149 X** Delete TITLE Change ☐ Addition ABASCAL, GERARDO II NAME STREET ADDRESS 2730 SW 3RD AVE #301 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33129** ☐ Delete TITLE ☐ Change ☐ Addition GODOY-ARNOLDSON, MALVINA NAME NAME STREET ADDRESS 1408 S. BAYSHORE DRIVE STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP MIAMI FL TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

ARMANDO F. COBELO 1-13-2001 (301)2649476 SIGNATURE:

address, with all other like empowered

changed, or on an attachment of