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NONPROFIT CORPORATION ANNUAL REPORT

1998



ELORIDA DEPARTMENT DE STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT

FILED Feb 12 1998 8:00am Secretary of State

. Corporation	on Name	00002390 (2	•)				
CUBA	NOS CON FE EN ACCION	INC.				2	
Principal Place of Business		Malling Address				s searning, did sonn, gean, obnit gont sonn boin bain 1966 frind sonn obt 1961	1
1833 W FLAGLER ST		15022 ROYAL PALM COURT				3. Date Incorporated or Qualified	
1633 Miami Lakes I	EL 22121	MIAMI LAKES FL 33014 US				04/25/1994	
US	rt 33131	05				4. FEI Number Applied For	
						65-0492474 Not Applicat	blø
2. Principal P	Place of Business	2a. Mailing Address 26				5. Certificate of Status Desired Section Fee Regulred	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
City & State		City & State				7. Is this nonprofit corporation a homeowners association?	
Zip 24	Country 25	Zip Country			,	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	
	9. Name and Address of Curr		100			10. Name and Address of New Registered Agent	
			t	81	Name		
VALDES, ALBERTO			}	82	Stroot A	Address (P.O. Box Number is Not Acceptable)	ᅴ
	OYAL PALM COURT		62 Street Addi			Address (F.O. Dox Nulliber is Not Acceptable)	
MIAMI LAKES FL 33014		83					
			1	84	City	FL 85 Zip Code	
office or r	to the provisions of Sections 617.0 registered agent, or both, in the Sta im familiar with, and accept the obl	ite of Florida. Such change was	s authorized	i by	the corpo	corporation submits this statement for the purpose of changing its registere poration's board of directors. I hereby accept the appointment as registered	be
SIGNATURE	Signature, typed or printed name of registered a	agent and title it applicable. (NC	DTE Registered	Age	ent signature re	s regulred when reinstaling) DATE	-
12.	OFFICERS AND DIRECTORS		13.	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	TS DELETE 1.1		1.1 TIT	.1 TITLE		☐ Change ☐ Addit	ion
NAME	ANDRADE, ARTURO		1.2 NA	1.2 NAME			
STREET ADDRESS 13233 S.W. 86TH TERRACE		•	1.3 STREET ADDRESS		ADDRESS		
CITY-ST-ZIP MIAMI FL 33183			1.4 CIT		T-21P		
TITLE	π	☐ DELETE	2.1 TIT		ļ	☐ Change ☐ Additi	ion
NAME	PEREZ-CRESPO, NANCY		2.2 NA	ME	1		

4635 SW 89TH PL STREET ADDRESS 23 STREET ADDRESS **MIAMI FL 33165** CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE VALDES, ALBERTO 3.2 NAME NAME 15022 ROYAL PALM COURT STREET ADDRESS 3.3 STREET ADDRESS MIAMI LAKES FL 33014 CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Addition 4.1 TITLE TITLE **GUTIERREZ, RENALDY J** 4. 2 NAME NAME STREET ADDRESS 601 BRICKELL KEY DRIVE, STE 501 4.3 STREET ADDRESS MIAMI FL 33131-2651 CITY-ST-ZIP 4.4 City - ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 52 NAME 5.3 STREET ADORESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS **6.3 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.

SIGNATURE:

Pres. 2/3/98 305821-0400