

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.)

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **N94000005405 (5)**

1. Corporation Name

REAL CLUB ESPANOL, INC.



Principal Place of Business

Mailing Address

**7401 NW 8TH ST
MIAMI FL 33126**

**7401 NW 8TH ST
MIAMI FL 33126**

3. Date Incorporated or Qualified

11/01/1994

3a. Date of Last Report

03/23/1995

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

Suite, Apt. #, etc.

City & State

Zip

Country

26

27

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4. FEI Number

65-0533815

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**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**GONZALEZ, EDELMIRO
9421 NW 16TH ST
MIAMI FL 33165**

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

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	DP	1.1 TITLE	
NAME	ALMEIDA, FRANCISCO	1.2 NAME	
STREET ADDRESS	% 7401 NW 8TH ST	1.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL 33126	1.4 CITY - ST - ZIP	
TITLE	DV	2.1 TITLE	
NAME	GONZALEZ, EDELMIRO	2.2 NAME	
STREET ADDRESS	% 7401 NW 8TH ST	2.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL 33126	2.4 CITY - ST - ZIP	
TITLE	DS	3.1 TITLE	
NAME	RODRIGUEZ, ALFONSO	3.2 NAME	
STREET ADDRESS	% 7401 NW 8TH ST	3.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL 33126	3.4 CITY - ST - ZIP	
TITLE	DT	4.1 TITLE	
NAME	PRECIADO, JOSE	4.2 NAME	
STREET ADDRESS	% 7401 NW 8TH ST	4.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL 33126	4.4 CITY - ST - ZIP	
TITLE	D	5.1 TITLE	
NAME	FERNANDEZ, CARLOS	5.2 NAME	
STREET ADDRESS	% 7401 NW 8TH ST	5.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL 33126	5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/24/96

Date

305-448-3323

Daytime Phone #

0006688

CR2E037 (3/96)