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Feb 12, 1999 8:00am  
Secretary of State

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NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N95000001653

1. Corporation Name

ASSOCIATION CIVICA-COMBATIENTES FDN, INC.

Principal Place of Business

1401 W. 29 ST., C-53  
HIALEAH FL 33012

Mailing Address

1401 W. 29 ST., C-53  
HIALEAH FL 33012



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

3. Date Incorporated or Qualified

04/04/1995

4. FEI Number

NOT APPLICABLE

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

9. Name and Address of Current Registered Agent

RODRIGUEZ, JUAN G  
1401 W. 29 ST., C-53  
HIALEAH FL 33012

10. Name and Address of New Registered Agent

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

TITLE D  
NAME RODRIGUEZ, JUAN G  
STREET ADDRESS 1401 W. 29 ST., C-53  
CITY-ST-ZIP HIALEAH FL 33012

DELETE

TITLE D  
NAME LUIS, GADEA  
STREET ADDRESS 3055 SW 27 LANE #8  
CITY-ST-ZIP MIAMI FL 33133

DELETE

TITLE D  
NAME LUIS VINDEL  
STREET ADDRESS 2209 CORAL GABLES  
CITY-ST-ZIP ALAMBRA CIRCLE FL 33135

DELETE

TITLE DS  
NAME ROBLES, RODOLFO  
STREET ADDRESS 7500 SW 153 ST., #105  
CITY-ST-ZIP MIAMI FL 33193

DELETE

TITLE D  
NAME FERMIN, TORRES  
STREET ADDRESS 7423 SW 152 AVE #208  
CITY-ST-ZIP MIAMI FL 33193

DELETE

TITLE D  
NAME ENRIQUE BERMUDEZ  
STREET ADDRESS 12010 SW 96TH ST  
CITY-ST-ZIP MIAMI FL 33186

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

Change Addition

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

Change Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

Change Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

Change Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

Change Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

Change Addition

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)