## FILE NOW: FILING FEE IS \$61.25

**NONPROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 **POCUMENT** #

N95000002631 (8)

**FILED** Feb 24 1998 8:00am Secretary of State

ASOCIACION DE GANADEROS DE CUBA, INC.							
Principal Place of Business Mailing Address						s sammen ein jaret gebre nette bette bette bette bette bette bit bet 1181 1081	
6141 SW 17TH MIAMI FL 3315	6141 SW 17TH STREET MIAMI FL 33155				3. Date Incorporated or Qualified  06/07/1995  4. FEI Number  Applied For		
2. Principal F	Place of Business	2e. Mailing Address	<del>.</del>			65-0588216 Not Applicable	
21		26]			5. Certificate of Status Desired S8.75 Additional Fee Required		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			6. Election Campalgn Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
City & Stat	l <del>0</del>	City & State			7. Is this nonprofit corporation a homeowners association?		
Zip	Country	<b>28</b> Zip	Cou	ıntry		Yes No	
24	25	29	30			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes No	
	9. Name and Address of Curre	nt Registered Agent				10. Name and Address of New Registered Agent	
				81	Name		
RODRIGUEZ, RODRIGO V Treesure 6141 SW 17TH STREET				62	Street Add	ress (P.O. Box Number is Not Acceptable)	
MIAMI F				<b>B</b> 3			
]				84	City	85 Zip Code	
11. Pursuant	to the provisions of Sections 617.05	02 and 617.1508. Florida Statu	ites the a	bove	-named corr	PL   P   P   P   P   P   P   P   P   P	
office or I	registered agent, or both, in the State	a of Florida. Such change was	suthorize	d by	the corporal	poration submits this statement for the purpose of changing its registered tion's board of directors. I hereby accept the appointment as registered	
SIGNATURE	and the transfer and the transfer and osping	janonis or, occinon o 11.0000, 1	ioriou otat	iuios.	•	2/18/98	
	Signature, typed or printed name of registered ag			d Agen	ni signature requi	ired when reinstating) DATE	
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME	D CARDINA DICADOO D	☐ DELETE	1.1 11			Change Addition	
NAME SARDINA, RICARDO R STREET ADDRESS 9022 SW 123RD COURT UN		IT A 21A		1.2 NAME			
OITY-ST-ZIP MIAMI FL 33186		11 0-310	1.3 STREET ADDRESS 1.4 CITY-ST-ZIP				
TITLE	D	DELETE	2.1 TI		I-ZIP	Change Addition	
NAME	JORGE, ALBERTO	_	2.2 N/				
STREET ADDRESS	5901 SW 86TH STREET	* • * * * * * * * * * * * * * * * * * *		2.3 STREET ADDRESS			
CITY-ST-ZIP	SO. MIAMI FL 33143		i i	ITY- \$1			
TITLE	TS	☐ DELETE	3 1 TI			Change Addition	
NAME	RODRIGUEZ, RODRIGO		32 N/	AME			
STREET ADDRESS	6141 SW 17TH STREET		3.3 ST	REET A	ADDRESS		
CITY-ST-ZIP	MIAMI FL 28		3.4. C	ITY-ST	T-ZIP	1	
TITLE	Р	DELETE	4.1 TO	TLE		Change Addition	
NAME	ROSE, HENRY		4. 2 N	4. 2 NAME			
STREET ADDRESS	13920 SW 106TH ST		4.3 ST	4.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL	T DELETE		TY-ST	-ZIP		
TITLE	S CHIEFDA LEODOLDO	☐ DELETE		5.1 TITLE		Change Addition	
NAME STREET ADDRESS				5.2 NAME			
STREET ADDRESS 11680 CANAL DR CITY-ST-ZIP MIAM! FL				5.3 STREET ADDRESS			
CITY-ST-ZIP TITLE				5.4 CITY-ST-ZIP 6.1 TITLE		☐ Change ☐ Addition	
NAME							
STREET ADDRESS			6.2 NA		LDDDEEC		
GINELI MUUNESS			0.3 5	DEE! A	ADORESS		

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 eath; 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 pame appears in Block 12 or Block 13 if changed, or on an attechment with an address.