

FILED

Jun 18, 2001 8:00 am
Secretary of State

06-18-2001 90148 001 ****30.62

06-18-2001 90148 002 ****30.63

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N95000005388

1. Entity Name
DIRECCIONARIO REVOLUCIONARIO DEMOCRATICO CUBANO, INC. (LA)Principal Place of Business
10250 S.W. 56 Street
A102
Miami, FL 33165
U.S.Mailing Address
10250 SW 56 Street
A102
Miami, FL 33165-7098
U.S.2. Principal Place of Business
10250 SW 56 Street
Suite, Apt. #, etc.
C2033. Mailing Address
10250 SW 56 Street
Suite, Apt. #, etc.
C203City & State
Miami FL 33165
Zip
33165
Country
USCity & State
Miami FL 33165
Zip
33165
Country
US4. FEI Number
65-0661049Applied For
Not Applicable5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

TOME, JAY R.
2701 Ponce De Leon Drive
Mezzanine Level
Coral Gables, FL 33165

7. Name and Address of New Registered Agent

Name
MICHAEL HEIDI
Street Address (P.O. Box Number is Not Acceptable)
4000 Hollywood Boulevard
Suite 735 South
City
Hollywood FL Zip Code
33021

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

5/15/01

DATE

FILE NOW
FEE IS \$61.259. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to FeesMake Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE	VD	☐ Delete
NAME	FERNANDEZ DE CASIRO, JUAN JOSE	
STREET ADDRESS	10250 SW 56 Street, A102	
CITY-ST-ZIP	Miami, FL 33165	
TITLE	FD	☒ Delete
NAME	BERMUEZ, JUAN CARLOS	
STREET ADDRESS	10250 SW 56 Street, A102	
CITY-ST-ZIP	Miami, FL 33165	
TITLE	T	☐ Delete
NAME	DE CESPEDES, JAVIER	
STREET ADDRESS	10250 SW 56 Street, A102	
CITY-ST-ZIP	Miami, FL 33165	
TITLE	SD	☐ Delete
NAME	GUTIERREZ, ORLANDO	
STREET ADDRESS	10250 SW 56 Street, A102	
CITY-ST-ZIP	Miami, FL 33165	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	VD T	☒ Change ☐ Addition
NAME		
STREET ADDRESS	10250 SW 56 ST, C203	
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	PD	☒ Change ☐ Addition
NAME		
STREET ADDRESS	10250 SW 56 ST, C203	
CITY-ST-ZIP		
TITLE	VD	☒ Change ☐ Addition
NAME		
STREET ADDRESS	10250 SW 56 Street, C203	
CITY-ST-ZIP		
TITLE	SD	☐ Change ☒ Addition
NAME	RIVERO, JANISSET	
STREET ADDRESS	10250 SW 56 Street, C203	
CITY-ST-ZIP	MIAMI FL 33165	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 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 (11/00)