

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 28, 2002 8:00 am
Secretary of State

0025916

DOCUMENT # N95000005388

1. Entity Name

DIRECTORIO REVOLUCIONARIO DEMOCRATICO CUBANO, IN C.

03-28-2002 90834 001 ****35.00
 03-28-2002 90834 002 ****35.00

Principal Place of Business

Mailing Address

**10250 SW 56 ST
 C203
 MIAMI FL 33165
 US**

**10250 SW 56 ST
 C203
 MIAMI FL 33165
 US**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0661049

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired



**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HEIDT, MICHAEL
 4000 HOLLYWOOD BOULEVARD
 SUITE 735 SOUTH
 HOLLYWOOD FL 33021**

Name

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

City

FL

Zip Code

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)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

T ☐ Delete
FERNANDEZ DE CASTRO, JUAN JOSE
 STREET ADDRESS **10250 SW 56 ST, C203**
 CITY-ST-ZIP **MIAMI FL 33165**

☐ Change ☐ Addition
 TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

SD ☐ Delete
RIVERO, JANISSET
 STREET ADDRESS **10250 SW 56 STREET, C203**
 CITY-ST-ZIP **MIAMI FL 33165**

☐ Change ☐ Addition
 TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

PD ☐ Delete
DE CESPEDES, JAVIER
 STREET ADDRESS **10250 SW 56 ST, C203**
 CITY-ST-ZIP **MIAMI FL 33165**

☐ Change ☐ Addition
 TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

VD ☐ Delete
GUTIERREZ, ORLANDO
 STREET ADDRESS **10250 SW 56 STREET, C203**
 CITY-ST-ZIP **MIAMI FL 33165**

☒ Change ☐ Addition
 TITLE **National Secretary**
 NAME **Orlando Gutierrez**
 STREET ADDRESS **10250 SW 56 St, C203**
 CITY-ST-ZIP **Miami, FL 33165**

☐ Delete
 TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition
 TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Delete
 TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition
 TITLE
 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 #

2/8/02

CR2E037 (9/01)