

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
Apr 30, 1999 8:00 am
Secretary of State

04-30-1999 90007 006 ****61.25

0032307

DOCUMENT # N96000001912

1. Corporation Name

PRODUCTORES DE AZUCAR DE CUBA, INC.

Principal Place of Business

6262 BIRD RD SUITE 3-I
STE. 3C
MIAMI FL 33155
US

Mailing Address

6262 BIRD RD SUITE 3-I
STE. 3C
MIAMI FL 33155
US



2. Principal Place of Business

21 6255 BIRD ROAD

2a. Mailing Address

26 6255 BIRD ROAD

3. Date Incorporated or Qualified

04/09/1996

4. FEI Number

65-0676545

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

ZULUETA, IGNACIO G
6262 BIRD RD., STE. 3C
MIAMI FL 33155

10. Name and Address of New Registered Agent

81 Name

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

6255 BIRD RD

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 ☐ DELETE
NAME ZUBILLAGA, CARLOS
STREET ADDRESS 351 ALHAMBRA PLACE
CITY-ST-ZIP WEST PALM BEACH FL 33405

TITLE D ☐ DELETE
NAME LOPEZ-SILVERO, JOSE E
STREET ADDRESS 9682 FOUNTAINBLEAU BLVD SUITE 404
CITY-ST-ZIP MIAMI FL 33172

TITLE D ☐ DELETE
NAME BLANCO, FRANCISCO E
STREET ADDRESS 180 ARAGON AVE 6TH FLOOR
CITY-ST-ZIP CORAL GABLES FL 33134

TITLE D ☐ DELETE
NAME GASTON, CARLOS E
STREET ADDRESS 1825 COUNTRY CLUB PARK
CITY-ST-ZIP CORAL GABLES FL 33134

TITLE D ☐ DELETE
NAME BLANCO, ALFREDO JR
STREET ADDRESS 16 SEVILLA AVE
CITY-ST-ZIP CORAL GABLES FL 33134

TITLE D ☐ DELETE
NAME ZULUETA, FERNANDO
STREET ADDRESS 212 SW 20TH RD
CITY-ST-ZIP MIAMI FL 33129

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

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

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

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

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

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

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 #

4-26-99

305-854-2014

CR2E037 (11/98)