

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2007 8:00 am
Secretary of State

03-20-2007 90017 002 ****61.25

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1. Entity Name
PRODUCTORES DE AZUCAR DE CUBA, INC.



Principal Place of Business
**6255 BIRD ROAD
MIAMI, FL 33155 US**

Mailing Address
**212 SW 20 RD
MIAMI, FL 33129 US**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03062007 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number
65-0676545

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

**ZULUETA, IGNACIO G
6255 BIRD RD
MIAMI, FL 33155**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when re-registering)

DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☒ Delete
NAME **BLANCO, FRANCISCO**
STREET ADDRESS **10120 SW 93 AVE**
CITY-ST-ZIP **MIAMI, FL 33176**

TITLE **D** ☐ Change ☒ Addition
NAME **BLANCO, ILEANA**
STREET ADDRESS **4250 INGRAHAM HIGHWAY**
CITY-ST-ZIP **COCONUT GROVE, FL 33133-6718**

TITLE **D** ☒ Delete
NAME **GARCIA CHACON, FERNANDO**
STREET ADDRESS **1544 TARRAGONA AVE.**
CITY-ST-ZIP **CORAL GABLES, FL 33144**

TITLE **D** ☐ Change ☒ Addition
NAME **BLANCO, ENMA**
STREET ADDRESS **4250 INGRAHAM HIGHWAY**
CITY-ST-ZIP **COCONUT GROVE FL 33133-6718**

TITLE **D** ☐ Delete
NAME **AGUILA, PERCY**
STREET ADDRESS **6741 SW 13 ST**
CITY-ST-ZIP **MIAMI, FL 33144**

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

TITLE **D** ☒ Delete
NAME **BLANCO, ALFREDO JR**
STREET ADDRESS **4250 INGRAHAM HIGHWAY**
CITY-ST-ZIP **COCONUT GROVE, FL 331336718**

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

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

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

TITLE **D** ☒ Delete
NAME **PORRO, CARLOS**
STREET ADDRESS **151 CRANDON BLVD., #553**
CITY-ST-ZIP **KEY BISCAYNE, FL 33149**

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 exemptions contained in Chapter 119, 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 **FERNANDO ZULUETA** 03-06-2007 305-854-3223
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #