## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED DOCUMENT # **N96000002553** Mar 29, 2000 8:00 am **Secretary of State** ASAMBLEA PROVINCIAL DE ORIENTE EN EL EXILIO, INC 03-29-2000 90081 020 \*\*\*\*61.25 Mailing Address Principal Place of Business 2624 NW 24TH COURT 2624 NW 24TH COURT MIAMI FL 33142-6520 MIAMI FL 33142 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 65-0682698 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) RODRIGUEZ, LUIS 2624 NW 24TH COURT **MIAMI FL 33142** 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. 20/00 (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. Department of State **FEE IS \$61.25** Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. MANUEL P. ROMERO & Change DP ☐ Delete TITLE DP. TITLE 9952 S.W. 8th St. Apt. 140 NAME NAME SALAS, MIGUEL STREET ADDRESS STREET ADDRESS 2050 NW 16TH TERRACE #190 E MIAMI FL 33174 CITY-ST-ZIP CITY-ST-7IP MIAMI FL 33125 John V. V180 Pl. Change ☐ Addition TITLE D. V TITLE DV □ Delete NAME MARTIN, CATALINA NAME STREET ADDRESS STREET ADDRESS 925 NW 7TH ST RD MIA. Fl. 33/65 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33136 Change ☐ Addition ☐ Delete TITLE DS TITLE D. 🎏 59/0/300 105 T NAME RODRIGUEZ, LUIS NAME STREET ADDRESS STREET ADDRESS 2624 NW 24TH COURT Fula 33144 CITY-S1-ZIP CITY-ST-ZIP MIAMI FL 33142 TITLE DES Change TITLE DS ☐ Delete ☐ Addition NAME NAME RIQUENE, EDDY STREET ADDRESS STREET ADDRESS 5910 SW 10TH ST CITY-ST-ZIP. CITY-ST-ZIP WEST MIAM! FL 33144 Addition ☐ Delete TITLE Change TITLE D.T. NAME NAME VIVES. PEDRO AMI, FL, 33185 STREET ADDRESS STREET ADDRESS 6880 SW 48TH TERRACE CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33155 erovives Change ☐ Defete TITLE ☐ Addition TITLE DT D.T. 6880 SW 48 TRR NAME GONGORA, PEDRO P NAME STREET ADDRESS STREET ADDRESS 2931 SW 103RD AVE CITY-ST-ZIP CITY-ST-ZIP **MAIMI FL 33165** 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

SIGNATURE:

changed, or on an attachment with an address, with all other like empowered

(66/6)

**CR2E037**