

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
 AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

FILED
 Jul 23 1998 8:00am
 Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
 Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # N96000005539 (9)

1. Corporation Name

LITTLE HAVANA COMMUNITY TEAM, INC.



Principal Place of Business

Mailing Address

400 NW 2ND AVE
 ROOM 412
 MIAMI FL 33130

400 NW 2ND AVE
 ROOM 412
 MIAMI FL 33130

3. Date Incorporated or Qualified

10/28/1996

4. FEI Number

31-1486130

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

7. Is this nonprofit corporation a homeowners association?

Yes No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent

GARCIA, MARTINEZ & DOMINQUEZ, P.A.
 501 NE 1ST AVE
 SECOND FLOOR
 MIAMI FL 33132

10. Name and Address of New Registered Agent

81 Name

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

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 FINALE, HUMBERTO
 STREET ADDRESS 400 NW 2ND AVE RM 412
 CITY-ST-ZIP MIAMI FL 33128

TITLE D DELETE

NAME CANTON, PABLO
 STREET ADDRESS 111 SW 5 AVE
 CITY-ST-ZIP MIAMI FL 33130

TITLE D DELETE

NAME MIRABILE, HECTOR
 STREET ADDRESS 111 SW 5 AVE
 CITY-ST-ZIP MIAMI FL 33130

TITLE D DELETE

NAME MONTESDEOCA, MILTON
 STREET ADDRESS 400 NW 2 AVE, 206
 CITY-ST-ZIP MIAMI FL

TITLE D DELETE

NAME D'AGOSTINO, FREDDY
 STREET ADDRESS 111 SW 5 AVE
 CITY-ST-ZIP MIAMI FL 33130

TITLE D DELETE

NAME CAPORELLI, JANE
 STREET ADDRESS 3301 NE 5TH AVE #801
 CITY-ST-ZIP MIAMI FL 33137

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition

1.2 NAME Carlos Fernandez
 1.3 STREET ADDRESS 1950 S.W. 19st.
 1.4 CITY-ST-ZIP Miami, FL 33145

2.1 TITLE D Change Addition

2.2 NAME Lourdes Delgado
 2.3 STREET ADDRESS 1950 SW. 19st.
 2.4 CITY-ST-ZIP Miami, FL 33145

3.1 TITLE D Change Addition

3.2 NAME David Turner
 3.3 STREET ADDRESS 19 West Flagler #600
 3.4 CITY-ST-ZIP Miami, FL 33130

4.1 TITLE D Change Addition

4.2 NAME Martha Cangas
 4.3 STREET ADDRESS 400 NW. 2nd. #412
 4.4 CITY-ST-ZIP Miami, FL 33128

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)(l), 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.

SIGNATURE:

Humberto Finale
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-16-98 305-579-3344
 Date Daytime Phone #

CR2E037 (5/98)