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NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999



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

DOCUMENT # N96000006052

1. Corporation Name

THE ROMANIAN/AMERICAN CULTURAL ASSOCIATION, INC.

Principal Place of Business

1918 HARRISON ST  
SUITE 102  
HOLLYWOOD FL 33020  
US

Mailing Address

1918 HARRISON ST  
SUITE 102  
HOLLYWOOD FL 33020  
US



2. Principal Place of Business

21 2026 SCOTT ST.  
Suite, Apt. #, etc.

22

City & State

23 HOLLYWOOD

24 33020

Country FL-US

2a. Mailing Address

26 2026 SCOTT ST.  
Suite, Apt. #, etc.

27

City & State

28 HOLLYWOOD

29 33020

Country FL-US

3. Date Incorporated or Qualified

11/21/1996

4. FEI Number

65-0712594

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

9. Name and Address of Current Registered Agent

PETERSON DAN  
1587 NW 157TH AVE  
PEMBROKE PINES FL 33028

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 PD ☐ DELETE

NAME PETERSON, DAN  
STREET ADDRESS 1587 NW 157TH AVE  
CITY-ST-ZIP PEMBROKE PINES FL 33028

TITLE D ☐ DELETE

NAME MATASA, CLAUDIU  
STREET ADDRESS 1507 HOLLYWOOD BLVD.  
CITY-ST-ZIP HOLLYWOOD FL

TITLE D ☐ DELETE

NAME MARGA, BUDA  
STREET ADDRESS 1600 S OCEAN DR  
CITY-ST-ZIP HOLLYWOOD FL 33019

TITLE D ☐ DELETE

NAME BODUS, ALEXANDER  
STREET ADDRESS 3134 PIERCE ST  
CITY-ST-ZIP HOLLYWOOD FL

TITLE D ☐ DELETE

NAME BANU, JOHN  
STREET ADDRESS GETTYSBURG TERR  
CITY-ST-ZIP PLANTATION FL

TITLE D ☐ DELETE

NAME DRACEA, IOANA  
STREET ADDRESS 851 THREE ISLANDS BLVD.  
CITY-ST-ZIP HALLANDALE FL

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 IRO empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (1/98)

0022032