

DOCUMENT # N96000006486

1. Entity Name

COLOMBIAN AMERICAN COALITION OF FLORIDA, INC.

FILED
May 03, 2000 8:00 am
Secretary of State

02-20-2000 90029 014 ****70.00

Principal Place of Business
 280 ARAGON AVENUE
 CORAL GABLES FL 33134
 US

Mailing Address
 290 ARAGON AVENUE
 CORAL GABLES FL 33134-5009
 US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
 280 ARAGON AV.
 Suite, Apt. #, etc.

3. Mailing Address
 280 ARAGON AV
 Suite, Apt. #, etc.

City & State
 CORAL GABLES FL.

City & State
 CORAL GABLES, FL

Zip
 33134

Country
 US

Zip
 33134

Country
 US

4. FEI Number
 65-0716556

Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 CABRERA, CARLOS A
 12205 S.W. 71 COURT
 MIAMI FL 33156

7. Name and Address of New Registered Agent
 Name DR. LUIS ALGARRA
 Street Address (P.O. Box Number is Not Acceptable)
 1405 VENETIA AVE.
 City CORAL GABLES FL Zip Code 33134

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.

SIGNATURE Dr. Luis Algarra M.D. President 01/11/2000
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW:
 FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

Make Check Payable to
 Department of State

10. OFFICERS AND DIRECTORS

TITLE	VP	<input checked="" type="checkbox"/> Delete
NAME	SUAREZ, ENRIQUE	
STREET ADDRESS	12359 S W 132ND CT	
CITY-ST-ZIP	MIAMI FL 33186	
TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	CABRERA, CARLOS	
STREET ADDRESS	12205 S W 71ST CT.	
CITY-ST-ZIP	MIAMI FL 33156	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	TARKAN, YAJMYN	
STREET ADDRESS	8241 S W 32ND TERRACE	
CITY-ST-ZIP	MIAMI FL 33155	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	NEIRA, GABRIEL	
STREET ADDRESS	12420 S W 1ST ST RD	
CITY-ST-ZIP	CORAL SPRINGS FL 33071	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	MANTILLA, JAIMÉ	
STREET ADDRESS	290 ARAGON AVENUE	
CITY-ST-ZIP	CORAL GABLES FL 33134	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	ITALO, CARVAJAL	
STREET ADDRESS	290 ARAGON AVENUE	
CITY-ST-ZIP	CORAL GABLES FL 33134	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	DR. LUIS ALGARRA	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	PRESIDENT	
STREET ADDRESS	1405 VENETIA AVE.	
CITY-ST-ZIP	CORAL GABLES, FL 33134	
TITLE	LUIS QUARTE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	FIRST VP	
STREET ADDRESS	14013 SW 90 TERRACE	
CITY-ST-ZIP	MIAMI, FL 33196	
TITLE	CARLOS CABRERA	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	VP PUBLIC RELATIONS	
STREET ADDRESS	12205 SW 71ST CT.	
CITY-ST-ZIP	MIAMI, FL 33156	
TITLE	MIGUEL BESARANO	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	VP FINANCE	
STREET ADDRESS	1000 PONCE DE LEON	
CITY-ST-ZIP	CORAL GABLES, FL, 33134	
TITLE	ENRIQUE SUAREZ	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	VP DEVELOPMENT	
STREET ADDRESS	12359 SW 132ND CT.	
CITY-ST-ZIP	MIAMI FL 33186	
TITLE	LUY WAGNER	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	TREASURER	
STREET ADDRESS	3371 SW 22nd St	
CITY-ST-ZIP	MIAMI FL 33134	

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

SIGNATURE: [Signature] 01/11/2000 305 4486207
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CFR2037 (9/99)

DR: Luis Aljarra
President
1405 Venetia Ave
Coral Gables Fl: 33134

Luis Clarte
Vice-president
14813 SW 90 Terrace
Miami Fl: 33196

Miguel Bejarano
V.P. Finance
1000 Ponce de Leon
Coral Gables, Fl: 33134

Carlos Cabrera
VP. Public relations
12205 SW 71st Ct
Miami, Fl: 33156

Enrique Suarez
VP. Development
12359 SW 132 NW Ct
Miami, Fl: 33186

