## 2002 UNIFORM BUSINESS REPORT (UBR)

## **FILED** May 23, 2002 8:00 am Secretary of State DOCUMENT # **N97000001097** 1. Entity Name 05-23-2002 90067 046 \*\*\*\*70.00 HUMAN RIGHTS IN CUBA, INC. Principal Place of Business Mailing Address 10302 NW 9 ST CIRCLE 10302 NW 9 ST CIRCLE **UNIT 203** MIAMI FL 33172 **MIAMI FL 33172** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0888332 Not Applicable 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 Name DE LA TORRIENTE, COSME P.A. Street Address (P.O. Box Number is Not Acceptable) 155 S.W. 25TH ROAD MIAMI FL 33129 Zip Code FL 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be Make Check Payable to FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 ☐ Delete TITLE (9/01) ☐ Addition CUADRA, ANGEL NAME? NAME STREET ADDRESS 5341 SW 5 TERR. STREET ADDRESS CITY-ST-ZIP MIAMI FL 33013 CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition DOLGICER, GISELA NAME STREET ADDRESS 14910 SW 39TH ST. STREET ADDRESS CITY-ST-ZIP MIAMI FL 33184 CITY - ST-7IP D--- x --- ---TITLE Delete TITLE Change 🔭 🗌 Addition NAME FARBER, SAMUEL NAME STREET ADDRESS 296 DE GRAW ST. STREET ADDRESS CITY-ST-ZIP **BROOKLYN NY 11231** CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition CASTILLO, SIRO D NAME STREET ADDRESS 2250 SW 3RD AVE., STE. 201 STREET ADDRESS CITY-ST-ZIP MIAMI FL 33129 CITY-ST-ZIP TITLE · Delete TITLE ☐ Change □ Addition RODRIGUEZ, AMADO NAME NAME STREET ADDRESS 2250 SW 3RD AVE., STE, 201 STREET ADDRESS CITY-ST-ZIE MIAMI FL 33129 CITY-ST-ZIP TITLE ☐ Defete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ŽIP

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: