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NONPROFIT CORPORATION ANNUAL REPORT
1999

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

DOCUMENT # N97000001791

1. Corporation Name
EL CLUB CUBANO LATINO-AMERICANO DE BROWARD, INC.

615631 - 90014 - 32

Principal Place of Business	Mailing Address
929 ORANGE ISLE FT LAUDERDALE FL 33315	929 ORANGE ISLE FT LAUDERDALE FL 33315

2. Principal Place of Business
21 2941 HIDDEN HOLLOW LN
Suite, Apt. #, etc. 22
City & State 23 DAVIE FL
Zip 24 33328 Country 25

2a. Mailing Address
26 P.O. BOX 290905
Suite, Apt. #, etc. 27
City & State 28 DAVIE FL
Zip 29 33328 Country 30

3. Date Incorporated or Qualified
03/31/1997

4. FEI Number
NOT APPLICABLE
Applied For ☐ Not Applicable ☒

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

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

EGUES, JORGE
929 ORANGE ISLE
FT LAUDERDALE FL 33315

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable) 2941 HIDDEN HOLLOW LANE
83
84 City DAVIE FL 85 Zip Code 33328

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 J Egues (JORGE EGUES) PRESIDENT 4/28/99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D EGUES, JORGE 929 ORANGE ISLE FT LAUDERDALE FL 33315	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	PD PRESIDENT JORGE EGUES 2941 HIDDEN HOLLOW LN DAVIE, FL 33328	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PEREZ, MICHELLE 3270 NW 113 AVE SUNRISE FL 33323	☒ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	TD ~~TREASURER~~ JUAN CARLOS CRUZ 9556 OLD PINE ROAD BOCA RATON, FL 33428	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BARRIOS, YOLANDA 320 NE 56TH ST FT. LAUDERDALE FL 33334	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	SD SECRETARY YOLANDA BARRIOS 450 SE 1ST TERRACE POMPANO BEACH FL 33060	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	VPD VICE PRESIDENT SAL FRANCO 2657 PINEWOOD CT DAVIE, FL 33328	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (11/98)

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 like empowered.

SIGNATURE: SIGNATURE REQUIRED J Egues JORGE EGUES 4/28/99 954-791-9555
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
PRESIDENT x 222