

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N98000000149

1. Entity Name
PLANTADOS UNTIL FREEDOM AND DEMOCRACY IN
CUBA, INC.



Principal Place of Business

151 SW 57TH AVE.
MIAMI, FL 33144

Mailing Address

151 SW 57TH AVE.
MIAMI, FL 33144

FILED
Aug 04, 2008 08:00 AM
Secretary of State



07302008 No Chg-NP

CR2E037 (4/06)

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4. FEI Number
65-0810524

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

FIGUEROA, LUIS A
815 PONCE DE LEON BLVD
SUITE 200
CORAL GABLES, FL 33134

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IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE _____

Filing Fee is \$61.25
Due by September 12, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D
NAME OVIEDO, ELENO O
STREET ADDRESS 1113 N.W. 134TH AVE.
CITY-ST-ZIP SUNRISE, FL 33323

TITLE D
NAME DE'FANA, ANGEL
STREET ADDRESS 5725 SW 132 COURT #7
CITY-ST-ZIP MIAMI, FL 33183

TITLE D
NAME ARGUELLES, ANGEL L
STREET ADDRESS 199 W. 15 STREET
CITY-ST-ZIP HIALEAH, FL 33010

TITLE D
NAME PERDOMO, ROBERTO
STREET ADDRESS 11119 NW 4TH STREET
CITY-ST-ZIP MIAMI, FL 33174

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

000000957108
08/04/08-80009-018 61.25

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Eleno O. Oviedo (Eleno O. Oviedo) 7/30/08 305-269-1812
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #