

AMOUNT DUE ON OR BEFORE 09/15/99: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25)

**NONPROFIT
CORPORATION
ANNUAL REPORT
1999**


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

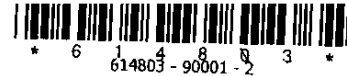
DOCUMENT # N98000002079

1. Corporation Name

FUNDACION CENTRO AMERICANA, INC.

FILED
Sep 01, 1999 8:00 am
Secretary of State

09-01-1999 90006 030 ****69.25



Principal Place of Business

4864 NW 7TH STREET
MIAMI FL 33125

Mailing Address

4864 NW 7TH STREET
MIAMI FL 331251762 Coral Way
MIAMI, FL
33145

2. Principal Place of Business

1762 Coral Way

Suite, Apt. #, etc.

2a. Mailing Address

1762 Coral Way

Suite, Apt. #, etc.

3. Date Incorporated or Qualified

04/10/1998

4. FEL Number

62-0942751

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

CANTERA, EDUARDO ESQ
4864 NW 7TH STREET
MIAMI FL 33125

10. Name and Address of New Registered Agent

81 Name EDUARDO CANTERA, ESQ.

82 Street Address (P.O. Box Number is Not Acceptable)

1762 Coral Way

83

84 City

MIAMI

FLORIDA

FL

85 Zip Code

33145

I, 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 accepting 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

9/9/99

2. OFFICERS AND DIRECTORS

TITLE	PD	☒ DELETE
NAME	CERNA, JUAN F	
STREET ADDRESS	2964 AVIATION AVENUE THIRD FLOOR	
CITY-STATE-ZIP	COCONUT GROVE FL 33133	
TITLE	VD	☐ DELETE
NAME	CANTERA, EDUARDO ESQ	
STREET ADDRESS	4864 NW 7TH STREET	
CITY-STATE-ZIP	MIAMI FL 33125	
TITLE	SD	☐ DELETE
NAME	GUZMAN-CANTERA, JOSEPHINE	
STREET ADDRESS	4864 NW 7TH STREET	
CITY-STATE-ZIP	MIAMI FL 33125	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PRESIDENT	☒ Change ☐ Addition
1.2 NAME	EDUARDO CANTERA, ESQ.	PRESIDENT
1.3 STREET ADDRESS	1762 Coral Way	
1.4 CITY-STATE-ZIP	MIAMI, FLORIDA 33145	
2.1 TITLE	VICE-PRESIDENT	☒ Change ☐ Addition
2.2 NAME	GUZMAN-CANTERA, JOSEPHINE	
2.3 STREET ADDRESS	1762 Coral Way	
2.4 CITY-STATE-ZIP	MIAMI, FLORIDA 33145	
3.1 TITLE	HELEN VANILLA	☐ Change ☒ Addition
3.2 NAME	HELEN VANILLA	
3.3 STREET ADDRESS	1762 Coral Way	
3.4 CITY-STATE-ZIP	MIAMI, FL 33145	
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-STATE-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-STATE-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-STATE-ZIP		

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 recorder 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 such like empowered.

SIGNATURE:

SIGNATURE REQUIRED

8/10/99 (705) 442-4343

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOSEPHINE GUZMAN-CANTERA
VICE-PRESIDENT

RECEIVED
9/9/99

CR2E037 (5/99)