

FILE NOW: FILING FEE IS \$61.25

**FILED**  
**May 06, 1999 8:00 am**  
**Secretary of State**

05-06-1999 90207 033 \*\*\*\*61.25

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NONPROFIT CORPORATION ANNUAL REPORT <b>1999</b>		FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # N98000006528**

1. Corporation Name

**FUNDACION CUBANA MARTIANA, INC.**

Principal Place of Business

3358 MILITARY TRAIL  
LAKE WORTH FL 33463

Mailing Address

3358 MILITARY TRAIL  
LAKE WORTH FL 33463



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21		26		11/13/1998	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		65-0875214	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/>	
23		28		\$8.75 Additional Fee Required	
Zip		Zip		6. Election Campaign Financing <input type="checkbox"/>	
24		29		Trust Fund Contribution	
Country		Country		30	
25		30		\$5.00 May Be Added to Fees	

9. Name and Address of Current Registered Agent

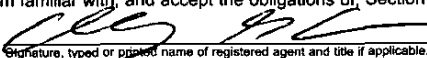
CASAS, ALEJANDRO G  
SLINKMAN AND, SLINKMAN, P.A.  
1401 FORUM WAY, SUITE 201  
WEST PALM BEACH FL 33401

10. Name and Address of New Registered Agent

81	Name	<b>Casas, Alejandro G</b>	
82	Street Address (P.O. Box Number is Not Acceptable)	<b>Plasencia &amp; Associates</b>	
83		<b>2 Harvard Circle, Suite 800</b>	
84	City	<b>West Palm Beach</b>	<b>FL</b>
85	Zip Code	<b>33409</b>	

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

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

**ALEJANDRO G. CASAS**

**4/29/99**

(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	1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP
	PD BELLO, MARIA	1315 VELDA WAY	WELLINGTON FL 33414				
	VP FERREL, MIGUEL	3358 MILITARY TRAIL	LAKE WORTH FL 33463				
	S MORALES, CANDITA	3358 MILITARY TRAIL	LAKE WORTH FL 33463				
	T MONTEL, FRANK	3358 MILITARY TRAIL	LAKE WORTH FL 33463				
	D MORALES, JOSE PEDRO	3358 MILITARY TRAIL	LAKE WORTH FL 33463				
	D NODARSE, OSCAR	4466 CAVERET	LAKE WORTH FL 33463				

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/29/99** **561-642-1111**  
Date Daytime Phone #

CR2E037 (11/98)