

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000000571

1. Entity Name

CUBAN AMERICAN HERITAGE FESTIVAL, INC.

Principal Place of Business

5570 THIRD AVENUE  
KEY WEST FL 33040

Mailing Address

5570 THIRD AVENUE  
KEY WEST FL 33040-6032

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEL Number

65-0889930

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HIGHSMITH, ROBERT E  
1315 WHITEHEAD STREET  
KEY WEST FL 33040

Name

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

City

FL

Zip Code

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)

DATE

FILE NOW:  
FEE IS \$81.25

9. Election Campaign Financing  
Trust Fund Contribution.

☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

TITLE D  
NAME SALINERO, FRED  
STREET ADDRESS 5570 THIRD AVENUE  
CITY-ST-ZIP KEY WEST FL 33040 ☐ Delete

TITLE D  
NAME PADRON, ROBERT  
STREET ADDRESS 5570 THIRD AVENUE  
CITY-ST-ZIP KEY WEST FL 33040 ☒ Delete

TITLE D  
NAME HENSON, STEVE  
STREET ADDRESS 5570 THIRD AVENUE  
CITY-ST-ZIP KEY WEST FL 33040 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D/P  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☒ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D/P  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☒ Change ☒ Addition

TITLE D/P  
NAME HUGH MORGAN  
STREET ADDRESS 5570 3RD AVE  
CITY-ST-ZIP KEY WEST, FL 33040 ☐ Change ☒ Addition

TITLE D/P  
NAME JOSE GONZALEZ  
STREET ADDRESS 5570 3RD AVE  
CITY-ST-ZIP KEY WEST, FL 33040 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

12. 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 another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

(305) 294 7018