N99000000971

TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 FEB 15 MII. 16

SUBJECT:	CUBAN	WORLD	CONGRESS.	Ivc.	
	(Proposed corporate name - must include suffix)				

900002775779----02/15/99--01122--018 ******78.75 ******78.75

Enclosed is an original	and one(1) copy or	f the articles of incorpor	ation and a check for
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- □ \$70.00. Filing Fee
- \$78.75
- Filing Fee & Certificate
- □\$122.50
- Filing Fee
- & Certified Copy
- □ \$131.25
- Filing Fee,
- Certified Copy & Certificate

ADDITIONAL COPY REQUIRED

FROM:

| Juan Omar Sixto |
| Name (Printed or typed) |
| Gogo SW 11 St |
| Address |
| West Miami, Fc 33144 |
| City, State & Zip |
| (305) 266-0846 |
| Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

2 2 2

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Not for Profit Corporation Act, hereby adopt(s) the following Articles of Incorporation:

<u>ARTICLE</u>	I	NAME

The name of the corporation shall be:

CUBAN WORLD CONFRESS INC.

PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

6090 5W 11 St, WEST MIAMI, FL 33144

PURPOSE(S)

The specific purpose(s) for which the corporation is organized is(are):

UNIFICATION OF THE CUBAN PEOPLE

MANNER OF ELECTION OF DIRECTORS

The manner in which the directors are elected or appointed is:

FIRST BOARD WILL BE

APPOINTED, SUBSEQUENT BOARDS BY ECECTION.

INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

JUAN OMAR STXTO GOGO SW 11 ST WEST MIAMI, FL, 33144

_INCORPORATOR

The name and address of the Incorporator to these Articles of Incorporation are:

JUAN OMAR STX 6090 SW 11 ST

WEST MIAMI, FC, 33144

Signature/Incorporator

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Signature/Registered Agent