2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # N9900001963 May 08, 2000 8:00 am Secretary of State ORGANIZACION CIVICA CULTURAL DOMINICANA "AYUDAME 05-08-2000 90075 021 ****61.25 Mailing Address Principal Place of Business 1610 ROYAL FOREST COURT 1610 ROYAL FOREST COURT WEST PALM BEACH FL 33406-5654 WEST PALM BEACH FL 33406 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number City & State City & State 650911079 Not Applicable \$8.75 Additional Zip Country Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) RUIZ. NEREYDA 1610 ROYAL FOREST COURT WEST PALM BEACH FL 33406 City 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. **Department of State FEE IS \$61.25** Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. Delete ☐ Addition TITLE TITLE PD NAME NAME RAMERO, RADHAMES Collado, Silverio STREET ADDRESS STREET ADDRESS 2130 SHERWOOD FOREST BLVD., APT. 14 3469 Chickasaw Cir CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL 33415 Green Acres, Fl 33467 Change Addition TITLE VPD 🔀 Delete TITLE NAME GOMEZ. VITERBO NAME VPD STREET ADDRESS STREET ADDRESS 5108 SHERMAN RD. Ruiz, Helman CİTY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL 33415 1610 Roval Forest Ct ☐ Addition TITLE Delete TITLE West Palm Beach, Fl 3340 Change NAME RODRIGUEZ, RAFAEL NAME STREET ADDRESS 6028 FOREST HILL BLVD. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **WEST PALM BEACH FL 33415** ☐ Delete TITLE Change ☐ Addition GOMEZ, LINDA NAME STREET ADDRESS STREET ADDRESS 5397 CANNON WAY CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL 33415 TITLE ☐ Change ☐ Addition TITLE ☐ Delete NAME RUIZ, NEREYDA NAME STREET ADDRESS STREET ADDRESS 1610 ROYAL FOREST COURT CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL 33406 TITLE Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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 all other like empowered.

RE: SIGNATURE AND TYPED OR PRINTED NAME ON SIGNING OFFICER OR DIRECTOR

04/24/00 (561) 967-2739 Daytime Phone #