

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000006308

1. Entity Name

TRIP INC

R

FILED

00 SEP 18 AM 11:19

SECRETARY OF STATE



DO NOT WRITE IN THIS SPACE

Principal Place of Business 1223 SW 4TH ST. MIAMI FL 33135-2407	Mailing Address 1223 SW 4TH ST. MIAMI FL 33135-2407
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2. Principal Place of Business	3. Mailing Address
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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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4. FEI Number APPLIED FOR	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

DIAZ, GUARONE M
1223 SW 4TH ST.
MIAMI FL 33135-2407

7. Name and Address of New Registered Agent

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 in printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when withdrawing. DATE

FILE NOW:
FEE IS \$61.25

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 NAME STREET ADDRESS CITY-ST-ZIP	ERANDINO M. DIAZ <input type="checkbox"/> Delete 1223 SW 4th St. Miami, FL 33135-2407
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/P-T <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D.S. Adego <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	RANDRES AZOS <input type="checkbox"/> Delete 1223 SW 4th Street Miami FL 33135-2407
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D + Executive <input type="checkbox"/> Delete Vice President
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	A DE GOYTSOLO, P.A. HAS RELOCATED <input type="checkbox"/> Addition ITS PROFESSIONAL PRACTICE TO 1223 SW FOURTH STREET, SUITE 25, MIAMI FL 33135-2407 TEL 305.642.3484 EXT 120 FAX 305.642.7463
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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, when so other like empowered.

SIGNATURE: **SIGNATURE REQUIRED**

042700 305.941.800

SIGNATURE AND TYPED NAME OF REGISTERED AGENT OR DIRECTOR

Date Date of Filing

CR25037 (9/99)

KE



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N99000006308

Cuban American National Council, Inc.

September 14, 2000

Hon. Katherine Harris
Secretary of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32114-6327

Re: **CODEL, INC.** Your # N99000006308

Dear Ms. Harris:

This refers to your August 7th letter indicating that your office had not filed subject legal entities 2000 annual report, because your office required that all corporations not for profit have not less than three (3) directors and that the report indicate whether the persons listed were directors or officers by adding the applicable letters.

As you can see from the corrected annual report which I sent you, this corporation has three directors, all with offices at the corporation's, who hold the respective offices indicated in said report, to wit:

<u>Name:</u>	<u>Whether a director:</u>	<u>Office held:</u>
Guarioné M. Díaz	yes	President and Treasurer.
Agustín de Goytisolo	yes	Secretary
Andrés Pazos	Yes	Executive Vice President.

Accordingly, to the best of my knowledge and understanding the said report complies with your office's requirements and this is to appreciate that you have it filed and inform me accordingly.

Do not hesitate to call me, if in doubt.

Sincerely yours,

Agustín de Goytisolo, P.A

Enc:3

1223 S.W. 4th Street, Miami, Florida 33135-2407

Tel: (305) 642-3484 Fax: 642-7463 http://www.cnc.org



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