FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9300003096 (3)

AMERICA-CUBA, INC.

Principal Place of Business

Mailing Address

FILED Feb 27 1998 8:00am Secretary of State



1 1 0 .p 4 . 1 10.0							
13525 S.W. 20TH TERRACE 13525 S.W. 20TH TERRACE MIAMI FL 33175 MIAMI FL 33175							
MIAMI PL 33	110	MIMMI FL 33173			DO NOT WRITE IN TH	IS SPACE	
					3. Date Incorporated or Qualified		-
					01/14/1993		
2. Principal P	lace of Business	2a. Mailing Address			4. FFI Number	11.	Applied For
21 168 20	1 1 2 = 11	26 16870 N.	W. 78	Places	22-3229732	 	Not Applicable
Suite, Apt.		Suite, Apt. #, etc.		1000			Additional
22		27			5. Certificate of Status Desired		Required
City & State City			FLORID) <i>a</i>	6. Election Campaign Financing Trust Fund Contribution		O May Be d to Fees
Zip	Country	Zip	Country		8. This corporation owes or has paid the	current year I	Intangible
24 3304		29 33016	30 1/	1/8	Personal Property Tax due June 30.	_=	₩ No
	9. Name and Address of Current	Registered Agent		,	10. Name and Address of New Registers	d Agent	
CORPORATION SERVICE COMPANY				81 Name			
1201 HAYS STREET TALLAHASSEE FL 32308			82	Street Add	ress (P.O. Box Number is Not Acceptable)		
10	PEN WOOFF IF ASONO		83				
			84	City		85 Zij	p Code
44 Duraniant	to the manifeless of Continue 607 0500	and CO7 1500 Florida Clatu	ton the about		poration submits this statement for the purpose		ita registered
office or re	registered agent, or both, in the State of	f Florida, Such change was	authorized by	the corpora	poration submits this statement for the purpose ation's board of directors. I hereby accept the a	or changing opointment a	is registered
agent. La	m familiar with, and accept the obligati	ons of, Section 607.0505, Fi	lorida Statute	8.	•		•
SIGNATURE							
	Signature, typed or printed name of registered agent	 		ent signature requ	ulred when reinstating) DATE		200 IN 40
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS A		
TITLE	CEOP	L DELETE	1.1 TITLE			Change	e 🔲 Addition
NAME	FONT, PEDRO		1.2 NAME				
STREET ADDRESS	18 DWIGHT LANE		1.3 STREET	ADDRESS	*		
CITY-ST-ZIP	GREENWICH CT 06831		1.4 CITY-5	T-ZIP			
TITLE	COOP	☐ DELETE	2.1 TITLE		us (L Change	Addition
NAME	GOYANES, JOSE		2.2 NAME	1	•		
STREET ADDRESS	10565 NW 43RD TERRACE		2.3 STREET	ADDRESS			
CITY-ST-ZIP	MIAMI FL 33178		2. 4 CITY-	ST-ZIP	• • *		
TITLE	ŤD	☐ DELET É	3.1 TITLE			Change	Addition
NAME	VILLALBA, NICOLAS		3.2 NAME				
STREET ADDRESS	68 LA GORCE CIRCLE		3.3 STREET	ADDRESS			
CITY-ST-ZIP	MIAMI BEACH FL 33141		3.4. CITY-				
TITLE	EVS	DELETE	4.1 TITLE	V1 £11		Change	Addition
NAME	FAGET, MARIANO		4. 2 NAME				
				ADDOCCO			
STREET ADDRESS	133525 SW 20TH TERRACE		4.3 STREET	l l			
CITY-ST-ZIP	MIAMI FL 33175	☐ DELETE	4.4 CITY-S 5.1 TITUE	51 - ZIP		Change	Addition
TITLE	y	DCCC1E	I				
NAME	FONT, OSCAR		5.2 NAME				
STREET ADDRESS	AVENIDA EL BOSQUE 128		5.3 STREET				
CITY-ST-ZIP	<u>\$AN ISIDRO, LIMA PERU</u>		5.4 CITY - S	T-ZIP		П	
TITLE	D	DELET E	6.1 TITL€			Change	Addition
NAME	FONT, PETER		6.2 NAME				
STREET ADORESS	401 E 34TH STREET., APT SO	UTH 4C	6.3 STREET	ADDRESS			
CITY-ST-ZIP	NEW YORK NY 10016		6.4 CITY - S	T-7IP			

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

Morum Fact

2/19/01

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