2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

V05678 DOCUMENT

1. Entity Name

CUBAN AMERICAN GOLFERS ASSOCIATION, INC.



Mar 17, 2003 8:00 am Secretary of State **FILED**

03-17-2003 90057 023 ***150.00

Principal Plac	ce of Busines	s	Mailing Address										
782 NW 42 AVENUE			782 NW 42 AVENUE										
SUITE 545			SUITE	E 545									
MIAMI FL 331	126		MIAMI FL 33126					1 1889 840				1980 1440 1814	
2. Principal Place of Business			3. Mailing Address					I IBEH BHA	II drimi b iti n d ilili	HERDA FEET BARA	: BJBJ1 B1841 B1\$11	I BJØJA BJØRI 1881	
· · · · · · · · · · · · · · · · · · ·													
Suite, Apt	. #, etc.		Suite, Apt. #, etc.					CHECK HERE IF MAKING CHANGES					
City & Star	to		City & State					4 551 No	 		1.1	Anathad Fac	_
City & Sta	te		Olly & State				4. FEI Number	65-030587	76	\longrightarrow	Applied For Not Applicable	+	
Zip Country			Zip Coun			trv			· ·		<u></u>	<u>-</u>	4
2ip Godiniry			2.0			шу		5. Certificate of Status Desired See Required \$8.75 Additional					
6. Name and Address of Current Registered Agent								7. Name and A	idress of Nev	, Registere	· · · · · · · · · · · · · · · · · · ·		┥
v. Name and Address of Current neglistered Agent								- w		~			1
ALVAREZ	. EMILIO	_										╛	
	42 AVENUE		Street Address			ress (P.	(P.O. Box Number is Not Acceptable)						
									· · · · · · · · · · · · · · · · · · ·				\dashv
SUITE 545													
MIAMI FL 33155						City				F	Zip Co	de	7
9 The above	named antit	y submits this statement for	the nure	one of changing its	rogiotor	nd office or res	nintara	d agant or both	in the State of		 . L		4
the obligat	tions of regist	y submits this statement for tered agent.	rine purp	oose or changing its	registere	ea onice or reg	gistered	a agent, or both,	in the State of	Fiorida. Tar	n iarnillar witr	т, апо ассерт	
	· ·	Ü											
SIGNATURE		or printed name of registered agent a		4.07									
	Signature, typed	or printed name of registered agent a	ind title it app	Dicable, (NOTE	:: Hegistere	d Agent signature re	equired w	nen reinstating)		DATE			4
		!! FEE IS \$150.00						9. Flecti	on Campaign	Financing	\$5	00 May Be	1
After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department o			1					I	Fund Contribu	_		ed to Fees	
Make Chec	K Payable to	o Florida Department of	<u></u>										
10.		OFFICERS AND I	DIRECTO	RS	11.			ADDITIONS/CH	IANGES TO O	FFICERS AN	ND DIRECTO	RS IN 11],
TITLE	P			☐ Delete	TITLE				1		Change	☐ Addition	
NAME	ALVAREZ, EMILIO A					E							
STREET ADDRESS 782 NW 42 AVENUE, SUITE 545						ET ADDRESS							1;
CITY-ST-ZIP	MIAMI FL	33126			CITY	-ST-ZIP							
TITLE	VP			☐ Delete	TITLE						☐ Change	Addition	
NAME		RA, ROGELIA JR			NAM								
STREET ADDRESS	6615 SW					ET ADDRESS							
CITY-ST-ZIP	MIAMI FL	33155			CHY	-ST-ZIP							_
TITLE				☐ Delete	TITLE	4					☐ Change	Addition	ĺ
NAME		* *			NAM			•					-
STREET ADDRESS						ET ADDRESS							
CITY-ST-ZIP					CHY	-ST-ZIP							4
TITLE]			☐ Delete	TITLE						☐ Change	Addition	
NAME					NAMI	I							
STREET ADDRESS CITY-ST-ZIP						ET ADDRESS							
				-		-ST-ZIP							4
TITLE				Delete	TITLE						Change	☐ Addition	1
NAMÉ OTREET ANDRESO					NAM								1
STREET ADDRESS CITY-ST-ZIP						ET ADDRESS ST-ZIP							{
					1-								4
TITLE				☐ Delete	TITLE	I					☐ Change	☐ Addition	
					NAME	ET ADDRESS							
					STILL	LI MUUMEUU							

12. I hereby certify that the information supplied with this filling 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 607, 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.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

LECUTEDENILIO A. Alvarez SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(305)663-0262