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 # V10149

(5)

THE CUBA NEWSLETTER, INC.

FILED
May 06 1998 8:00am
Secretary of State



Principal Place of Business Mailing Address					ATT BIBIT GIBIT GIBIT BIBIT BIBIT TABL	
SOI BRICKELL KEY DR		501 BRICKELL KEY DR STE 200		•		
MIAMI FL 331	31	MIAMI FL 33131		DO NOT WRITE IN	DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified		
2 2		T - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		01/27/1992		
<u> </u>	lace of Business	2a. Mailing Address	Vaca Dadasa	4. FEI Number	Applied For	
21 501 B Suite, Apt.	rickell Key Drive	26 501 Bricke11 Suite, Apt. #, etc.	key Drive	65-0310068	Not Applicable	
Suite 602		27 Suite 602		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing		
23 Miami, FL		Miami, FL			\$5.00 May Be Added to Fees	
Zip 33131	Country L USA	Z _(D) 33131	Country USA	8. This corporation owes or has paid		
24 33131	20	[29] [3	0 USA	Personal Property Tax due June 30		
9, Name and Address of Current Registered Agent NATIONAL DECICEDED ACCUSE INC. 81				10. Name and Address of New Regis		
MANUNAL REGISTERED AGENTS INC				NATIONAL REGISTERED AGEN		
STE 1800			82 Street Ac	ddress (P.O. Box Number is Not Acceptable) 501 Brickall Key Drive	1	
MIAMI FL 33131				Suite 602		
1	WW. 12 00 10 1		04 00			
			1 1	liami,	FL 85 Zip Code 33131	
11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statules, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes.						
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE						
12.	Signature typed or protect name of registered agent OFFICERS AND	Y	Rogistered Agent signature ret	quired when re-installing) ADDITIONS/CHANGES TO OFFICER	CATE RS AND DIRECTORS IN 12	
TITLE	DP	DELETE	1.1 THUE	DP	Change Addition	
NAME	WHISENAND, JAMES D.		12 NAME	Whisenand, James D.		
STREET ADDRESS	701 BRICKELL AVE STE 1800		1.3 STREET ADDRESS	501 Brickell Key Drive,	STE602	
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP	Miami, FL 33131		
TITLE		☐ DELETE	2.1 TITLE		☐ Change ☐ Addition	
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS			
CITY-ST-ZIP		Decem	2. 4 CITY - ST - ZIP			
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition	
NAME Street address			3.2 NAME 3.3 STREET ADDRESS			
CITY-ST-ZIP			3.3 STREET ADDRESS 3.4. CITY+ST+ZIP			
TITLE		DELETE	4.1 TITLE		Change Addition	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS		j	
CITY-ST-ZIP			4.4 CI1Y-ST-ZIP			
TITLE		DELETE	5.1 TITLE		Change Addition	
NAME			5.2 NAML			
STREET ADDRESS			5.3 STREET ADDRESS			
CiTY-ST-ZIP			54 CITY-ST-ZIP			
TITLE		☐ DELETE	61 TITLE		Change Addition	
NAME			62 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP	ertify that the information supplied with	this filmo does not qualify for t	6.4 C/TY-ST-ZIP	in Section 119.07(3)(i) Florida Statutes I fur	ther cartifu 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 trusted 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 without address.

SIGNATI IRF.

4/1/9