STATE OF FLORIDA
OFFICE OF FINANCIAL REGULATION

DISCLOSURE OF BUSINESS ACTIVITIES IN CUBA FORM

This form is being completed by an issuer of securities because the issuer or any affiliate thereof (please check the item that applies):

☐ has commenced engaging in business with the government of Cuba or any person or affiliate located in Cuba, after such securities became effectively registered with the Department; or

☐ is required to report a material change to information previously reported concerning business activities in Cuba.

The following information must be submitted to the Department within 90 days after commencement of such business or within 90 days of the date the change of information occurs with respect to previously reported information.

1. Name and address of the issuer:

2. Name and address of the person, affiliate or government agency in Cuba with which the issuer does business:

3. The nature of the business conducted with such entity:

4. The name, address and telephone number of the person completing this form:

__________________________________________ Date
Signature of person completing this form

__________________________________________ Date
Signature of Issuer

CUBA FORM, Disclosure of Business Activities in Cuba Form, Effective 11/22/10, Incorporated by Reference in Rule 69W-301.002, F.A.C.
NOTICE TO ISSUERS OR AFFILIATES DOING BUSINESS WITH CUBA

On April 10, 1992, Chapter 92-198, Laws of Florida, an act relating to disclosure of issuers doing business with Cuba became law.

Any prospectus used in connection with the sale of securities as of the above date shall disclose the following:

(a) The name of such person, affiliate, or government with which the issuer or affiliate does business and the nature of that business;

(b) A statement that the information is accurate as of the date the securities were effective with the Securities and Exchange Commission or with the department, whichever date is later, and

(c) A statement that current information may be obtained from:

   Department of Financial Services
   200 E. Gaines Street
   Tallahassee, FL 32399-0375
   (850) 410-9805

THIS DOES NOT APPLY TO ISSUERS OR AFFILIATES NOT DOING BUSINESS WITH ANY PERSON OR AFFILIATE LOCATED IN CUBA OR WITH THE GOVERNMENT OF CUBA.

The issuer must provide notice of commencement of business with Cuba or change in business with Cuba subsequent to the effective date of registration with the department on the attached form.