

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725287

FILED  
Apr 21, 2009  
Secretary of State

Entity Name: NATIONAL ASSOCIATION OF AGRONOMIC AND SUGAR ENGINEERS OF CUBA IN EXILE, INC.

**Current Principal Place of Business:**

6401-D SW 116 CT  
MIAMI FL., 331731735

**New Principal Place of Business:**

6401-D SW 116 CT  
MIAMI, FL 33173

**Current Mailing Address:**

1400 SW 27TH AVENUE  
SUITE 102  
MIAMI, FL 33145 US

**New Mailing Address:**

FEI Number: 59-2439182      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

QUESADA, MIGUEL A  
6401 SW 116 CT  
MIAMI FL., FL 33173 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: BALDERI, CARLOS  
Address: 7741 S.W 18TH TERRACE  
City-St-Zip: MIAMI, FL 33155

Title: D ( ) Delete  
Name: ENRIQUE, SIMON B  
Address: 2520 SW 64TH AVE  
City-St-Zip: MIAMI, FL 33155

Title: D ( ) Delete  
Name: JORGE, BRAVO  
Address: 3501 SW 109TH AVE  
City-St-Zip: MIAMI, FL 33165

Title: T ( ) Delete  
Name: CARRENO, PABLO  
Address: 9321 SW 69TH ST  
City-St-Zip: MIAMI, FL 33173

Title: D ( ) Delete  
Name: QUESADA, MIGUEL A  
Address: 6401 SW 116 CT  
City-St-Zip: MIAMI, FL 33173

Title: S ( ) Delete  
Name: GONZALEZ, TOMAS  
Address: 8117 SW 136 PL  
City-St-Zip: MIAMI, FL 33183

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: BALERDI, CARLOS  
Address: 7741 S.W 18TH TERRACE  
City-St-Zip: MIAMI, FL 33155

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CARLOS BALERDI

P

04/21/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date