2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 24, 2005
Secretary of State

DOCUMENT# N04000006774

Entity Name: CUBAN AMERICANS FOR CHANGE, INC.

Current Principal Place of Business:

770 PONCE DE LEON BLVD.
207
MIAMI BEACH, FL 33154

New Principal Place of Business:

8877 COLLINS AVE.
808
SURFSIDE, FL 33154

Current Mailing Address:

770 PONCE DE LEON BLVD.
207
MIAMI BEACH, FL 33154

New Mailing Address:

8877 COLLINS AVE.
808
SURFSIDE, FL 33154

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

CRUZ, AMAURY
1688 WEST AVE. APT. 602
MIAMI BEACH
FL, FL 33139 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: BENES, BERNARDO
Address: 8877 COLLINS AVENUE, APT. 808
City-St-Zip: MIAMI BEACH, FL 33154

Title: V ( ) Delete
Name: CRUZ, AMAURY
Address: 1688 WEST AVE. APT. 602
City-St-Zip: MIAMI BEACH, FL 33139

Title: V ( ) Delete
Name: PRIO, MARIA E
Address: 5728 MICHELANGELO STREET
City-St-Zip: CORAL GABLES, FL 33146

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: BENES, BERNARDO
Address: 8877 COLLINS AVENUE, APT. 808
City-St-Zip: SURFSIDE, FL 33154

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

Title: V (X) Change ( ) Addition
Name: CANIZARES, LORENZO
Address: 6650A TERRACE WAY
City-St-Zip: HARRISBURG, PA 17111 70

I hereby certify that the information supplied with this filing does not qualify for the 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 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: /AMAURY CRUZ/ V 08/24/2005
Electronic Signature of Signing Officer or Director — Date