

**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000008664

**FILED**  
**Apr 27, 2006**  
**Secretary of State**

**Entity Name:** ORGANIZACION DE PRODUCTORES AGROPECUARIOS DE CUBA, INC.

**Current Principal Place of Business:**

9145 SW 40TH ST., STE. 1A  
MIAMI, FL 33165

**New Principal Place of Business:**

**Current Mailing Address:**

9145 SW 40TH ST., STE. 1A  
MIAMI, FL 33165

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For (X)**                      **FEI Number Not Applicable ( )**                      **Certificate of Status Desired (X)**

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

DIAZ, ANTONIO C. CPA  
9145 SW 40TH ST., STE. 1A  
MIAMI, FL 33165    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:                      D                      ( ) Delete  
Name:                      CAPOTE, FAUSTO  
Address:                      600 BILTMORE WAY, STE. 920  
City-St-Zip:                      CORAL GABLES, FL 33134

Title:                      D                      ( ) Delete  
Name:                      MENDIGUTIA, RICARDO M.  
Address:                      2145 SW 82 CT.  
City-St-Zip:                      MIAMI, FL 33155

Title:                      D                      ( ) Delete  
Name:                      DE LA GUARDIA, LIBRADO  
Address:                      7331 SW 100TH CT.  
City-St-Zip:                      MIAMI, FL 33173

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

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 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: LIBRADO DE LA GUARDIA

D

04/27/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date