2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2009
Secretary of State

DOCUMENT# N08000009413

Entity Name: ACADEMIA DE LA HISTORIA DE CUBA (EXILIO), INC.

Current Principal Place of Business:

11111 BISCAYNE BOULEVARD #1005
MIAMI, FL 33181

New Principal Place of Business:

Current Mailing Address:

11111 BISCAYNE BOULEVARD #1005
MIAMI, FL 33181

New Mailing Address:

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:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

HANNA, ALEX A ESQ
8700 W FLAGLER STREET
380
MIAMI, FL 33174 US

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: ALEX A. HANNA 05/01/2009
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: VIAMONTE, OTTO R
Address: 11111 BISCAYNE BOULEVARD #1005
City-St-Zip: MIAMI, FL 33181

Title: D ( ) Delete
Name: TRINIDAD, DIEGO
Address: 11111 BISCAYNE BOULEVARD #1005
City-St-Zip: MIAMI, FL 33181

Title: D ( ) Delete
Name: ROS, ENRIQUE
Address: 11111 BISCAYNE BOULEVARD #1005
City-St-Zip: MIAMI, FL 33181

Title: D ( ) Delete
Name: BOUDY, JOSE S
Address: 11111 BISCAYNE BOULEVARD #1005
City-St-Zip: MIAMI, FL 33181

Title: P ( ) Delete
Name: PAULA, EMILIO M
Address: 11111 BISCAYNE BOULEVARD #1005
City-St-Zip: MIAMI, FL 33181

Title: S ( ) Delete
Name: FERREIRO, JULIO
Address: 11111 BISCAYNE BOULEVARD #1005
City-St-Zip: MIAMI, FL 33181

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:

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: ALEX A. HANNA RA 05/01/2009
Electronic Signature of Signing Officer or Director — Date