## 2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N12817

Apr 17, 2007 Secretary of State

Entity Name: THE CUBAN AMERICAN BAR FOUNDATION, INC.

**Current Principal Place of Business:** New Principal Place of Business:

100 SE 2ND STREET STE 2800 2525 PONCE DE LEON BOULEVARD

MIAMI, FL 33131 9TH FLOOR

CORAL GABLES, FL 33134

**Current Mailing Address:** New Mailing Address:

100 SE 2ND STREET STE 2800 2525 PONCE DE LEON BOULEVARD

9TH FLOOR MIAMI, FL 33131

CORAL GABLES, FL 33134

FEI Number: 65-0007784 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

CASTRO, ANTONIO C KOZYAK TROPIN & THROCKMORTON 100 SE 2ND STREET STE 2800 2525 PONCE DE LEON BOULEVARD MIAMI, FL 33131 9TH FLOOR

CORAL GABLES, FL 33134 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: CORALI LOPEZ-CASTRO 04/17/2007

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete ABADIN, RAMPH LOPEZ-CASTRO, CORALI Name: Name:

100 SE 2ND STREET STE 2800 Address: 2525 PONCE DE LEON BOULEVARD - 9TH FLOOR Address:

City-St-Zip: MIAMI, FL 33131 City-St-Zip: CORAL GABLES, FL 33134

(X) Change ( ) Addition Title: Title: ( ) Delete Name: LOPEZ-CASTRO, CORI Name: HERNANDEZ, ELIZABETH

Address: 100 SE 2ND STREET STE 2800 Address: 2525 PONCE DE LEON BOULEVARD -9TH FLOOR

City-St-Zip: MIAMI, FL 33131 City-St-Zip: CORAL GABLES, FL 33134

Title: () Delete Title: **VPD** (X) Change ( ) Addition

CASTRO, ANTONIO Name: QUINTANA, MARLENE Name:

100 SE 2ND STREET, SUITE 2800 2525 PONCE DE LEON BOULEVARD -9TH FLOOR Address: Address: MIAMI, FL 33131 City-St-Zip: CORAL GABLES, FL 33134

City-St-Zip:

Title: () Delete Title: TD ( ) Change (X) Addition

CHACON, RAUL Name: Name:

2525 PONCE DE LEON BOULEVARD -9TH FLOOR Address: Address:

City-St-Zip: City-St-Zip: CORAL GABLES, FL 33134 US

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: CORALI LOPEZ-CASTRO Ρ 04/17/2007