

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000001215

FILED  
Apr 27, 2005  
Secretary of State

Entity Name: ASOCIACION DE COLONOS DE CUBA, INC.

## Current Principal Place of Business:

555 E. 25TH ST  
SUITE 11  
HIALEAH, FL 330133839 US

## New Principal Place of Business:

## Current Mailing Address:

555 E. 25TH ST  
SUITE 11  
HIALEAH, FL 330133839 US

## New Mailing Address:

FEI Number: 65-0576553      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

SANCHEZ, JUAN T  
8840 SW 92ND AVE  
MIAMI, FL 33176 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: PINA, SILVESTRE  
Address: 3214 SW 154TH CT  
City-St-Zip: MIAMI, FL 33185

Title: D ( ) Delete  
Name: CALDERON, JOSE M  
Address: 3470 SW 9 STREET  
City-St-Zip: MIAMI, FL 33135

Title: D ( ) Delete  
Name: GABINO, PINA  
Address: 3214 SW 154TH CT  
City-St-Zip: MIAMI, FL 33185

Title: D ( ) Delete  
Name: SUAREZ, CARLOS  
Address: 3214 SW 154TH CT  
City-St-Zip: MIAMI, FL 33185

Title: D ( ) Delete  
Name: SIMON, CRUZ  
Address: 421 NW 109 AVE #1  
City-St-Zip: MIAMI, FL 33172

Title: D ( ) Delete  
Name: SANCHEZ, JUAN T  
Address: 8840 SW 92 AVE  
City-St-Zip: MIAMI, FL 33176

## 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: D (X) Change ( ) Addition  
Name: SOSA, OMELIO  
Address: 9225 SW 9 TERRACE  
City-St-Zip: MIAMI, FL 33174

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 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: SILVESTRE PINA

D

04/27/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date