

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000004260

FILED  
Jan 29, 2009  
Secretary of State

**Entity Name:** CENTER OF STUDIES ON ECONOMIC INTEGRATION AND INTERNATIONAL TRADE, INC.

**Current Principal Place of Business:**

701 BRICKELL AVENUE  
SUITE 1400  
MIAMI, FL 33131

**New Principal Place of Business:**

**Current Mailing Address:**

701 BRICKELL AVENUE  
SUITE 1400  
MIAMI, FL 33131

**New Mailing Address:**

FEI Number: 65-1145709      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

HARPER, GEORGE R  
701 BRICKELL AVENUE  
SUITE 1400  
MIAMI, FL 33131 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: PCD ( ) Delete  
Name: RUA BOIERO, RODOLFO  
Address: 701 BRICKELL AVENUE, SUITE 1400  
City-St-Zip: MIAMI, FL 33131

Title: S ( ) Delete  
Name: OTERO, LILIANA C  
Address: 701 BRICKELL AVENUE, SUITE 1400  
City-St-Zip: MIAMI, FL 33131

Title: T ( ) Delete  
Name: FERNANDEZ BATMALLE, ERNESTO J  
Address: 701 BRICKELL AVENUE, SUITE 1400  
City-St-Zip: MIAMI, FL 33131

**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 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: RODOLFO RUA BOIERO

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

PCD

01/29/2009

\_\_\_\_\_  
Date