

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 730567

**Entity Name:** CUBAN AMERICAN BAR ASSOCIATION, INC.

**Current Principal Place of Business:**

1825 PONCE DE LEON BLVD.  
#399  
MIAMI, FL 33134

**Current Mailing Address:**

1825 PONCE DE LEON BLVD.  
#399  
CORAL GABLES, FL 33134 US

**FEI Number:** 59-2512094

**Certificate of Status Desired:** No

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

GUTIERREZ, GISELLE ESQ.  
STEARNS WEAVER MILLER  
150 W. FLAGLER STREET SUITE 2200  
MIAMI, FL 33130 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:** GISELLE GUTIERREZ

04/18/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            GUTIERREZ, GISELLE ESQ.  
Address        STEARNS WEAVER MILLER  
                  150 W FLAGLER STREET SUITE 2200  
City-State-Zip: MIAMI FL 33130

Title            IMMEDIATE PAST PRESIDENT  
Name            RAMOS, MIRIAM SOLER ESQ.  
Address        HOLLAND & KNIGHT  
                  701 BRICKELL AVENUE SUITE 3300  
City-State-Zip: MIAMI FL 33131

Title            TREASURER  
Name            MARTINEZ-CID, JORDI C. ESQ.  
Address        MARTÍNEZ-CID LAW  
                  1 S.E. 3RD AVENUE SUITE 2300  
City-State-Zip: MIAMI FL 33131

Title            VP  
Name            FERNANDEZ, AMANDA L. ESQ.  
Address        RIVERO MESTRE LLP  
                  2525 PONCE DE LEON BLVD. SUITE  
                  1000  
City-State-Zip: MIAMI FL 33134

Title            PRESIDENT ELECT  
Name            LEY-SOTO, JAVIER A. ESQ.  
Address        MIAMI-DADE COLLEGE  
                  300 NE 2ND AVE  
City-State-Zip: MIAMI FL 33132

Title            SECRETARY  
Name            SERA, HAYDEE ESQ.  
Address        WEISS SEROTA HELFMAN COLE &  
                  BIERMAN  
                  2525 PONCE DE LEON BLVD. SUITE  
                  700  
City-State-Zip: CORAL GABLES FL 33134

*I hereby 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 all other like empowered.*

**SIGNATURE:** JORDI C. MARTINEZ-CID

TREASURER

04/18/2023

Electronic Signature of Signing Officer/Director Detail

Date