

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 732548

**FILED**  
**Mar 24, 2015**  
**Secretary of State**  
**CC0913965227**

**Entity Name:** COLEGIO TECNICO CUBANO, INC.

**Current Principal Place of Business:**

6041 SW 129TH COURT  
MIAMI, FL 33183

**Current Mailing Address:**

P.O. BOX 831012  
MIAMI, FL 33283 US

**FEI Number: 65-0901074**

**Certificate of Status Desired: No**

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

AQUINO, ALBERTO J  
6041 SW 129TH COURT  
MIAMI, FL 33183 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title VS  
Name MARRERO, EDEL  
Address 4345 W. 12TH LANE, APT. A  
City-State-Zip: HIALEAH FL 33012

Title S  
Name ROQUE, ERNESTO  
Address 7111 SW 102 COURT  
City-State-Zip: MIAMI FL 33173

Title T  
Name RODRIGUEZ, JOSE C.  
Address 2861 LEONARD DRIVE (APT F-106)  
City-State-Zip: AVENTURA FL 33160

Title V  
Name ARZA, HUGO  
Address 12800 SW 47TH STREET  
City-State-Zip: MIAMI FL 33175

Title P  
Name AQUINO, ALBERTO J  
Address 6041 SW 129TH COURT  
City-State-Zip: MIAMI FL 33183

Title VT  
Name FUENTES, JOSE M  
Address 2475 NW 16 ST ROAD #406  
City-State-Zip: MIAMI FL 33125

*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: ALBERTO J. AQUINO**

**PRESIDENT**

**03/24/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date