

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000009413

Entity Name: ACADEMIA DE LA HISTORIA DE CUBA (EXILIO), INC.**Current Principal Place of Business:**11111BISCAYNE BOULEVARD
#1005
MIAMI, FL 33181**Current Mailing Address:**8700 W FLAGLER ST
380
MIAMI, FL 33174 US**FEI Number: NOT APPLICABLE****Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**HANNA, ALEX AESQ
8700 W FLAGLER STREET
380
MIAMI, FL 33174 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 PRESIDENT
Name CONTE AGÜERO, LUIS DR.
Address 8700 W FLAGLER ST
 380
City-State-Zip: MIAMI FL 33174

Title VP
Name HANNA, ALEX DR.
Address 8700 W FLAGLER ST
 380
City-State-Zip: MIAMI FL 33174

Title VP
Name PORTUONDO, JORGE J
Address 8700 W FLAGLER ST
 380
City-State-Zip: MIAMI FL 33174

Title VP
Name SANDOVAL, MERCEDES
Address 8700 W FLAGLER ST
 380
City-State-Zip: MIAMI FL 33174

Title VP
Name ESPINOSA, ARMINDA
Address 8700 W FLAGLER ST
 380
City-State-Zip: MIAMI FL 33174

Title VP
Name TRINIDAD, DIEGO
Address 8700 W FLAGLER ST
 380
City-State-Zip: MIAMI FL 33174

Title AD-VITAM - PRESIDENT
Name HERNANDEZ, MARIO R
Address 8700 W FLAGLER ST
 380
City-State-Zip: MIAMI FL 33174

Title AD-VITAM - PRESIDENT
Name CALATAYUD, ANTONIO
Address 8700 W FLAGLER ST
 380
City-State-Zip: MIAMI FL 33174

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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: LUIS CONTEAGÜERO**PRESIDENT****04/16/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title AD-VITAM - PRESIDENT
Name MARTINEZ, EMILIO P
Address 8700 W FLAGLER ST
380
City-State-Zip: MIAMI FL 33174

Title VICE SECRETARY
Name ROMANI, SALVADOR O
Address 8700 W FLAGLER ST
380
City-State-Zip: MIAMI FL 33174

Title VICE TREASURER
Name CEDENO, ELENA
Address 8700 W FLAGLER ST
380
City-State-Zip: MIAMI FL 33174

Title SPEAKERS
Name ECHEVARRIA, MARIO L
Address 8700 W FLAGLER ST
380
City-State-Zip: MIAMI FL 33174

Title SPEAKER
Name VAN GELDER, MAGGIE
Address 8700 W FLAGLER ST
380
City-State-Zip: MIAMI FL 33174

Title SPEAKER
Name MORALES, SILVIA
Address 8700 W FLAGLER ST
380
City-State-Zip: MIAMI FL 33174

Title LEGAL COUNSEL
Name HANNA, ALEX DR.
Address 8700 W FLAGLER ST
380
City-State-Zip: MIAMI FL 33174

Title SECRETARY
Name LARRUA, SALVADOR
Address 8700 W FLAGLER ST
380
City-State-Zip: MIAMI FL 33174

Title TREASURER
Name ARENAL, JOSE
Address 8700 W FLAGLER ST
380
City-State-Zip: MIAMI FL 33174

Title VICE TREASURER
Name CEDENO, OSCAR
Address 8700 W FLAGLER ST
380
City-State-Zip: MIAMI FL 33174

Title SPEAKER
Name CORDOVES, ORLANDO
Address 8700 W FLAGLER ST
380
City-State-Zip: MIAMI FL 33174

Title SPEAKER
Name DANTE, BEBA
Address 8700 W FLAGLER ST
380
City-State-Zip: MIAMI FL 33174

Title SPEAKER
Name BALLESTER, ALFREDO
Address 8700 W FLAGLER ST
380
City-State-Zip: MIAMI FL 33174