

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

DOCUMENT# N12817

**Entity Name:** THE CUBAN AMERICAN BAR FOUNDATION, INC.

**Current Principal Place of Business:**

25 WEST FLAGLER STREET  
SUITE 800  
MIAMI, FL 33130

**Current Mailing Address:**

25 WEST FLAGLER STREET  
SUITE 800  
MIAMI, FL 33130 US

**FEI Number:** 83-0397116

**Certificate of Status Desired:** No

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

HERNANDEZ, ANNA MARIE  
701 BRICKELL AVENUE  
SUITE 3300  
MIAMI, FL 33131 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 SD  
Name ANNA MARIE, HERNANDEZ  
Address 701 BRICKELL AVENUE  
SUITE 3300  
City-State-Zip: MIAMI FL 33131

Title PD, PRESIDENT  
Name MARTINEZ-CID, RICARDO M  
Address 25 WEST FLAGLER STREET  
SUITE 800  
City-State-Zip: MIAMI FL 33130

Title TD  
Name GARCIA, MARIA D  
Address 312 MINORCA AVENUE  
City-State-Zip: CORAL GABLES FL 33134

Title VPD  
Name CRESPO, MANUEL C  
Address 201 ALHAMBRA CIRCLE  
SUITE 1205  
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:** MARIA D. GARCIA

**TREASURER**

**03/04/2015**

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

\_\_\_\_\_  
Date