

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 115899

**Entity Name:** COMPANIA CUBANA DE ELECTRICIDAD**Current Principal Place of Business:**6600 NORTH MILITARY TRAIL  
BOCA RATON, FL 33496**Current Mailing Address:**PO BOX 5023  
BOCA RATON, FL 33431 US**FEI Number:** 82-0481337**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 OUTSIDE DIRECTOR  
Name LITTMAN, IRVING  
Address 6600 NORTH MILITARY TRAIL  
City-State-Zip: BOCA RATON FL 33496

Title DIRECTOR, VP  
Name HLAVINKA, SARAH E.  
Address 6600 NORTH MILITARY TRAIL  
City-State-Zip: BOCA RATON FL 33496

Title DIRECTOR, PRESIDENT  
Name SCAGLIONE, DIEGO ANTHONY  
Address 6600 NORTH MILITARY TRAIL  
City-State-Zip: BOCA RATON FL 33496

Title VP  
Name AVANT, ROBERT G.  
Address 6600 NORTH MILITARY TRAIL  
City-State-Zip: BOCA RATON FL 33496

Title ASST. SECRETARY  
Name TRINLEY, ALICIA  
Address 6600 NORTH MILITARY TRAIL  
City-State-Zip: BOCA RATON FL 33496

Title VP, TREASURER  
Name HAGGARD, ADAM  
Address 6600 NORTH MILITARY TRAIL  
City-State-Zip: BOCA RATON FL 33496

*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ALICIA TRINLEY**ASSISTANT SECRETARY 04/25/2023**

Electronic Signature of Signing Officer/Director Detail

Date