


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 14, 2004 8:00 am
Secretary of State

06-14-2004 90004 012 ****70.00

DOCUMENT # 702057 1. Entity Name CONFEDERACION DE TRABAJADORES DE CUBA DELEGACION DE MIAMI, (CDTCDM), INC.					
Principal Place of Business 821 N.W. 40 AVENUE MIAMI, FL 33126				Mailing Address 821 N.W. 40 AVENUE MIAMI, FL 33126	
2. Principal Place of Business 1700 DELAWARE PKWY Suite, Apt. #, etc. 33				3. Mailing Address 1700 DELAWARE PKWY Suite, Apt. #, etc. 33	
City & State MIAMI, FL		City & State MIAMI, FL		4. FEI Number NOT APPLICABLE	
Zip 33125		Country USA		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent VALERIO, ALFONSO 617 WEST 136TH AVENUE MIAMI, FL 33182				7. Name and Address of New Registered Agent Name JOSE M. ALONSO Street Address (P.O. Box Number is Not Acceptable) 1700 DELAWARE PKWY APT. 33 City MIAMI FL Zip Code 33125	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u>Jose M. Alonso</u> DATE JUNE 8, 2004 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by September 8, 2004			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE S NAME GUTIERREZ, ARSENIO STREET ADDRESS 7425 SW 39TH TERR CITY-ST-ZIP MIAMI, FL 33155	<input checked="" type="checkbox"/> Delete		TITLE TREASURER NAME JOSE M. ALONSO STREET ADDRESS 1700 DELAWARE PKWY APT.33 CITY-ST-ZIP MIAMI, FL 33125	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE D NAME PADRON, ERNESTO STREET ADDRESS 16515 DUNOON COURT CITY-ST-ZIP MIAMI LAKES, FL 33014	<input checked="" type="checkbox"/> Delete		TITLE GENERAL SECRETARY (NY) NAME FACUNDO POMAR STREET ADDRESS 1577 SW 21 STREET CITY-ST-ZIP MIAMI, FL 33145	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE D NAME RAQUEL, GARCIA VALLADARE STREET ADDRESS 2870 NW 18TH AVE APT 5C CITY-ST-ZIP MIAMI, FL 33142	<input checked="" type="checkbox"/> Delete		TITLE SECRETARY NAME OVIDIO LOPEZ STREET ADDRESS 8595 SUNRISE LAKES BLVD. CITY-ST-ZIP SUNRISE, FL 33322	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE PD NAME LLUCH, CARLOS STREET ADDRESS 821 N W 40 AVE CITY-ST-ZIP MIAMI, FL 33126	<input checked="" type="checkbox"/> Delete		TITLE SECRETARY NAME ROSA F. ARIAS STREET ADDRESS 4717 NW 7 STREET BLDG. 10 CITY-ST-ZIP MIAMI, FL 33126	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE T NAME PEDROSO, CLARO STREET ADDRESS 3561 NW 19TH ST CITY-ST-ZIP MIAMI, FL 33125	<input checked="" type="checkbox"/> Delete		TITLE SECRETARY NAME CARLOS YODRA STREET ADDRESS 3000 SW 77 COURT CITY-ST-ZIP MIAMI, FL 33155	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE S NAME VALERIO, ALFONSO STREET ADDRESS 617 W 136TH AVENUE CITY-ST-ZIP MIAMI, FL 33182	<input checked="" type="checkbox"/> Delete		TITLE GENERAL SECRETARY NAME NICOLAS R. MARTIN STREET ADDRESS 902 SW 102 PLACE CITY-ST-ZIP MIAMI, FL 33174	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Jose M. Alonso</u>			JOSE M. ALONSO JUNE 8, 2004 (305)633-1913		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date Daytime Phone #</small>		

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