2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 19, 2009
Secretary of State

DOCUMENT# 702057

Entity Name: CONFEDERACION DE TRABAJADORES DE CUBA DELEGACION DE MIAMI, (CDTCDM), INC.

Current Principal Place of Business:

1700 DELAWARE PKWY
33
MIAMI, FL 33125

New Principal Place of Business:

Current Mailing Address:

1700 DELAWARE PKWY
33
MIAMI, FL 33125

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ALONSO, JOSE M
1700 DELAWARE PKWY - APT. 33
MIAMI, FL 33125 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title:	T	( ) Delete
Name:	ALONSO, JOSE M	
Address:	1700 DELAWARE PKWY - APT. 33	
City-St-Zip:	MIAMI, FL 33125	
Title:	GS	( ) Delete
Name:	FERNANDEZ, WILFREDO	
Address:	1300 LINCOLN RD #303	
City-St-Zip:	MIAMI BEACH, FL 33139	
Title:	S	( ) Delete
Name:	LOPEZ, OVIDIO	
Address:	8595 SUNRISE LAKES BLVD - APT. 212	
City-St-Zip:	FORT LAUDERDALE, FL 33322	
Title:	S	( ) Delete
Name:	ARIAS, ROSA F	
Address:	4717 NW 7 STREET BLDG. 10 - APT. 104	
City-St-Zip:	MIAMI, FL 33126	
Title:	S	( ) Delete
Name:	YODRA, CARLOS	
Address:	3000 SW 77 COURT	
City-St-Zip:	MIAMI, FL 33155	
Title:	GS	( ) Delete
Name:	MARTIN, NICOLAS R	
Address:	902 SE 102 PLACE	
City-St-Zip:	MIAMI, FL 33174	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JOSE M ALONSO T 02/19/2009

Electronic Signature of Signing Officer or Director — Date