

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 711633

FILED  
May 09, 2005  
Secretary of State

**Entity Name:** UNION OF CUBANS IN EXILE, INCORPORATED.

**Current Principal Place of Business:**

340 SEVILLA AVE.  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

340 SEVILLA AVE.  
CORAL GABLES, FL 33134

**New Mailing Address:**

**FEI Number:** 59-6231760      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

HERNANDEZ, JULIO  
340 SEVILLA AVE.  
CORAL GABLES, FL 33134      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: PD      ( ) Delete  
Name: HERNANDEZ, JULIO  
Address: P O BOX 1590594  
City-St-Zip: MIAMI, FL 33159

Title: VD      ( ) Delete  
Name: DE TORO, LORENZO,  
Address: 520 NW 31 AVE.  
City-St-Zip: MIAMI, FL

Title: SD      ( ) Delete  
Name: CARBALLO, DELIA,  
Address: 7940 SW 14 TERRACE  
City-St-Zip: MIAMI, FL

Title: TD      ( ) Delete  
Name: ZARRAGA, FERNANDO,  
Address: 1534 SW 17 ST.  
City-St-Zip: MIAMI, FL

**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:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: FERNANDO ZARRAGA

TD

05/09/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date