2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#715390

City-St-Zip:

Address:

MIAMI, FL 33173

Entity Name: CUBAN WOMEN'S CLUB, INC.

FILED Feb 11, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2320 S.W. 57 AVENUE 12982 SW 27TH STREET SUITE 202 MIAMI, FL 33175 MIAMI, FL 33155

New Mailing Address: Current Mailing Address:

2320 S.W. 57 AVENUE P. O. BOX 140133

CORAL GABLES, FL 33114 SUITE 202 US MIAMI, FL 33155

FEI Number: 59-1236064 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

YBARRA, GRISEL MARQUEZ, MARIA 2320 S.W. 57 AVENUE 12982 SW 27TH STREET SUITE 202 MIAMI, FL 33175 MIAMI, FL 33155 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: MARIA MARQUEZ 02/11/2008

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

City-St-Zip:

DORAL, FL 33178 US

() Delete (X) Change () Addition

YBARRA, GRISEL MARQUEZ, MARIA Name: Name: 2320 S.W. 57 AVENUE, SUITE 201 Address: 12982 SW 27TH STREET Address:

City-St-Zip: MIAMI, FL 33155 US City-St-Zip: MIAMI, FL 33175 US

Title: Title: (X) Change () Addition () Delete BARNARD, ELA Name: TUÑON, WILMA Name: Address: 8720 SW 103RD AVE Address: 9725 NW 52ND STREET, UNIT 207

Title: () Delete Title: (X) Change () Addition

PERMUY, CARMEN GARCIA, BERTHA DDS Name: Name: 5033 NW 7 STREET #608 9686 FONTAINEBLEAU BLVD. APT. 708 Address:

Address:

City-St-Zip: MIAMI, FL 33126 City-St-Zip: MIAMI, FL 33172

Title: VΤ (X) Delete Title: () Change () Addition Name:

BUDIHAS, IDALIA Name: 409 GERONA AVE Address: City-St-Zip: CORAL GABLES, FL 33146 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: MARIA MARQUEZ Ρ 02/11/2008