

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 718679

FILED
Mar 30, 2010
Secretary of State

Entity Name: CUBAN AMERICAN MEDICAL ASSOCIATION, INC.

Current Principal Place of Business:

3130 N.W. 7 ST.
MIAMI, FL 33125 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 141016
P O BXO 141016
CORAL GABLES, FL 331141016 US

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:

HUERTAS, ENRIQUE
3130 N.W. 7 ST.
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: PD
Name: HUERTAS, ENRIQUE
Address: 3121 NW 4TH ST.
City-St-Zip: MIAMI, FL

Title: TD
Name: HUERTAS, ENRIQUE
Address: 3121 NW - 4 ST
City-St-Zip: MIAMI, FL

Title: D
Name: FONSECA, DENIO O
Address: 5409 RIVIERA DR
City-St-Zip: CORAL GABLES, FL

Title: D
Name: BAEZ, RAMON
Address: 1811 COLUMBUS AVE
City-St-Zip: CORAL GABLES, FL

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

SIGNATURE: ENRIQUE HUERTAS

PD

03/30/2010

Electronic Signature of Signing Officer or Director

Date