2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#718969

FILED Feb 02, 2009 Secretary of State

Entity Name: ASSOCIATION OF CUBAN ENGINEERS, INC.

Current Principal Place of Business: New Principal Place of Business: P.O. BOX 557575 3301 MONEGRO ST MIAMI, FL 332557575 CORAL GABLES, FL 33134 **Current Mailing Address: New Mailing Address:** P.O. BOX 557575 MIAMI, FL 332557575 FEI Number: 59-6245455 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SANCHEZ, GONZALO 3301 MONÉGRO ST. CORAL GABLES, FL 33134 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete SANCHEZ, ROBERT Name: Name: 911 SISTINA AVENUE Address: Address: City-St-Zip: MIAMI, FL 33146 City-St-Zip: Title: () Delete Title: () Change () Addition Name: PINO, WILLIAM Name: Address: 102 N PROSPECT DR Address: City-St-Zip: CORAL GABLES, FL 33133 City-St-Zip: Title: () Delete Title: (X) Change () Addition FERNANDEZ, GERARDO Name: FERRER, RAMON Name: 13930 SW 38TH TERR. Address: 7300 SW 84 PL Address: City-St-Zip: MIAMI, FL 33143 City-St-Zip: MIAMI, FL 33175 Title: () Delete Title: () Change () Addition Name: ACOSTA, AMADO Name: 1680 NW 96 AVE Address: Address: City-St-Zip: MIAMI, FL 33172 City-St-Zip: Title: () Delete Title: (X) Change () Addition ACOSTA, MICHAEL SANCHEZ, GONZALO Name: Name: 11888 SW 72 TERRACE 3301 MONEGRO ST Address: Address: City-St-Zip: MIAMI, FL 33186 City-St-Zip: CORAL GABLES, FL 33134 Title: () Delete Title: (X) Change () Addition ROSE, JACK FIGUEREDO, LUIS Name: Name: Address: 822 SW 102 PLACE Address: 13111 SW 5TH ST. MIAMI, FL 33184 MIAMI, FL 33184 City-St-Zip: 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: GONZALO SANCHEZ T 02/02/2009