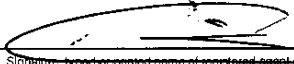


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 13, 2006 8:00 am
Secretary of State

02-13-2006 90004 020 ****61.25

DOCUMENT # 730567 1. Entity Name CUBAN AMERICAN BAR ASSOCIATION, INC.					
Principal Place of Business 100 SE 2ND STREET STE 2800 MIAMI, FL 33131 US			Mailing Address 100 SE 2ND STREET STE 2800 800 MIAMI, FL 33131 US		
2. Principal Place of Business 2525 Ponce de Leon Blvd. Suite, Apt. #, etc. 9th Floor City & State Coral Gables FL Zip 33134 Country USA		3. Mailing Address 2525 Ponce de Leon Blvd. Suite, Apt. #, etc. 9th Floor City & State Coral Gables FL Zip 33134 Country USA			
4. FEI Number 59-2512094				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CASTRO, ANTONIO C 100 SE 2ND STREET SUITE 2800 MIAMI, FL 33131			7. Name and Address of New Registered Agent Name Coral Lopez-Castro Street Address (P.O. Box Number is Not Acceptable) 2525 Ponce de Leon Blvd. 9th Floor City Coral Gables FL Zip Code 33134		
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE  DATE 1.3.06 (NOTE: Registered Agent signature required when reinstating)					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS					
TITLE	PD	☒ Delete	NAME	CASTRO, ANTONIO C	
STREET ADDRESS	100 SE 2ND STREET SUITE 2800				
CITY-ST-ZIP	MIAMI, FL 33131				
TITLE	TD	☒ Delete	NAME	DE LAS CUEVAS-DIAZ, VIVIAN	
STREET ADDRESS	100 SE 2ND STREET SUITE 2800				
CITY-ST-ZIP	MIAMI, FL 33131				
TITLE	PED	☐ Delete	NAME	LOPEZ-CASTRO, Coral	
STREET ADDRESS	100 SE 2ND STREET SUITE 2800 25				
CITY-ST-ZIP	MIAMI, FL 33131				
TITLE	VPD	☐ Delete	NAME	HERNANDEZ, ELIZABETH M	
STREET ADDRESS	100 SE 2ND STREET SUITE 2800				
CITY-ST-ZIP	MIAMI, FL 33131				
TITLE	SD	☒ Delete	NAME	DEL PINO, VICTORIA	
STREET ADDRESS	100 SE 2ND STREET SUITE 2800				
CITY-ST-ZIP	MIAMI, FL 33131				
TITLE	VPD	☐ Delete	NAME	MORALES, MARLENE	
STREET ADDRESS	100 SE 2ND STREET SUITE 2800				
CITY-ST-ZIP	MIAMI, FL 33131				
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
TITLE	PD	☒ Change ☐ Addition	NAME	Coral Lopez-Castro	
STREET ADDRESS	2525 Ponce de Leon Blvd, 9th Flr.				
CITY-ST-ZIP	Coral Gables, FL 33134				
TITLE	TD	☒ Change ☒ Addition	NAME	Landra Ferrera	
STREET ADDRESS	2525 Ponce de Leon Blvd., 9th Flr				
CITY-ST-ZIP	Coral Gables, FL 33134				
TITLE	PED	☒ Change ☐ Addition	NAME	Elizabeth M. Hernandez	
STREET ADDRESS	2525 Ponce de Leon Blvd., 9th Flr.				
CITY-ST-ZIP	Coral Gables, FL 33134				
TITLE	SD	☐ Change ☒ Addition	NAME	Anna Marie Hernandez	
STREET ADDRESS	2525 Ponce de Leon Blvd., 9th Flr.				
CITY-ST-ZIP	Coral Gables, FL 33134				
TITLE	VPD	☐ Change ☒ Addition	NAME	Roland Sanchez-Medina	
STREET ADDRESS	2525 Ponce de Leon Blvd., 9th Flr.				
CITY-ST-ZIP	Coral Gables, FL 33134				
TITLE	VPD	☒ Change ☐ Addition	NAME	Marlene Quintana	
STREET ADDRESS	2525 Ponce de Leon Blvd., 9th Flr.				
CITY-ST-ZIP	Coral Gables, FL 33134				
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 			Date 1.3.06 Daytime Phone # 305.372.1000		