

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 732548

FILED
Jan 31, 2011
Secretary of State

Entity Name: CUBAN EXILES ASSOCIATION OF PROFESSORS AND GRADUATES OF VOCATIONAL SCHOOLS, INC.

Current Principal Place of Business:

12800 SW 47TH ST
MIAMI, FL 33175 US

New Principal Place of Business:

Current Mailing Address:

PO 126575
HIALEAH, FL 33012 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:

ARZA, HUGO
12800 SW 47 TH ST
MIAMI, FL 33175 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: P
Name: GONZALEZ, EVARISTO
Address: 4351 SW 14TH STREET
City-St-Zip: MIAMI, FL 33134 US

Title: V
Name: AQUINO, ALBERTO
Address: 6041 SW 129TH COURT
City-St-Zip: MIAMI, FL 33183 US

Title: S
Name: RODRIGUEZ, JOSE C.
Address: 2861 LEONARD DRIVE (APT F-106)
City-St-Zip: AVENTURA, FL 33160 US

Title: VS
Name: MARRERO, EDEL
Address: 4345 W. 12TH LANE, APT. A
City-St-Zip: HIALEAH, FL 33012 US

Title: VT
Name: ARZA, HUGO
Address: 12800 SW 47TH STREET
City-St-Zip: MIAMI, FL 33175 US

Title: T
Name: ROJAS, MANUEL R
Address: 1395 W 41 STREET # 1
City-St-Zip: HIALEAH, FL 33012 US

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: MANUEL ROJAS

T

01/31/2011

Electronic Signature of Signing Officer or Director

Date