2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

May 10, 2007 8:00 am Secretary of State **DOCUMENT # 753529** 1. Entity Name 05-10-2007 90029 038 ****61.25 CONFEDERATION OF ASSOCIATIONS OF CUBAN CATHOLIC SCHOOLS ALUMNI, INC. Principal Place of Business Mailing Address 2285 SW. 24TH TERR. MIAMI FL 33145 2285 SW. 24TH TERR. MIAMI FL 33145 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/06) 24 TR 2285 S.W. 2285 S.W.24TERR. City & State City & State Applied For 4. FEI Numbor 65-0040923 Not Applicable MIAMI, FL MIAMI: FL. Country Country \$8.75 Additional Zip Zip 5. Certificate of Status Desired DADE COUNTY 33145 DADE COUNTY Fee Required 33145 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CELIA R. TOUZET TOUZET, CELIA ROSA Street Address (P.O. Box Number is Not Acceptable) 2285 SW 24 TERRACE MIAMI FL 33145 <u> 2285 S.W. 24 TERR.</u> Zip Code 3 3 1 4 5 MIAMI, FL. 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. 305-856-6653 APRIL 24 ZUU7 DATE arture, typed or printed ny ferol registered agent and title (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Due By May 1, 2007 Trust Fund Contribution, Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. TITLE ☐ Addition TITLE SD Delete LUIS FERNANDEZ NAME NAME GARCIA, TERESITA G 2101 S.W.82 CT. STREET ADDRESS STREET ADDRESS P.O. BOX 141721 MIAMI, FL. 33155 CITY-ST-ZIP CITY-ST-7IP CORAL GABLES FL 33114 ☐ Change Delete THIC Addition TITLE NAME TOUZET, CELIA ROSA NAME ISABEL SANCHEZ ORDAZ STREET ADDRESS STREET ADDRESS 2285 S.W. 24TH TERR 12810 S.W. 43 MIAMI. FL.331 #117 B CITY - ST - ZIP CITY-ST-7IP MIAMI FL 33145 ΤD TITLE □ Change ☐ Addition TITLE ▼ Delete CELIA R. TOUZET NAME NAM LUIS, MILAGROSA 2285 S.W. 24 TERR. STREET ADDRESS STREET ADDRESS 3441 NW 17TH STREET MIAMI, FL. 33145 CITY-ST-7IP CITY-ST-ZIP MIAMI FL 33145 TRILE □ Change ☐ Addition TITLI Delete VTD ÍŜÃBEL G. TUERO NAME NAME TUERO, ISABEL G STREET ADDRESS STREET ADDRESS 1037 S.W. 10 th AVE 1037 SW 10TH AVE CITY - ST- ZIP CITY-ST-ZIP MIAMI ,FL. 33130 MIAMI FL 33130 ☐ Change ☐ Addition ☐ Delete TITLE TRINIDAD MAYORIA NAME STREET ADDRESS 57 N.W. 48 PLACE STREET ADDRESS MIAMI. FL.33126 CITY - ST - ZIP CHY-SI-ZIP TITLE ☐ Delete THLE ☐ Change ☐ Addition MILAGROSA LUIS NAME NAME 3441 N.W. 17 th ST.

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

STREET LADDRESS

CHY-SI-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIG

305-856-6653

STREET ADDRESS

CHY-SI-ZIP

MIAMI, FL. 33125

Date

APRIL 24.2007

FILED