2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

## May 17, 2007 8:00 am Secretary of State **DOCUMENT # 757102** 05-17-2007 90035 017 \*\*\*\*70.00 1. Entity Name CABAIGUAN CLUB OF FLORIDA, INC. Principal Place of Business Mailing Address C/O MANUEL PEREZ-PADILLA 181 CRANDON BLVD #207 KEY BISCAYNE FL 33149 C/O MANUEL PEREZ-PADILLA 181 CRANDON BLVD #207 KEY BISCAYNE FL 33149 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State Applied For City & State 4. FEI Number 59-2089992 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name PEREZ-PADILLA, MANUEL Street Address (P.O. Box Number is Not Acceptable) 181 CRANDON BLVD APT 207 KEY BISCAYNE FL 33149 City Zip Code 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 Stgnature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) aring a second research and a second FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Florida Department of State 🔑 Due By May 1, 2006 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE Delete TITLE Change ☐ Addition CASTELLANOS, NILDA NAME NAME 195 PENNANA DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP HIALEAH FL 33010 CHY-ST-7IP VD TITLE Delete TITLE Change Addition CARMONA, JORGE NAME NAME 8735 SW 52 ST STREET ADDRESS STREET ADDRESS **MIAMI FL 33165** CITY-ST-ZIP CITY-ST-ZIP PD TITLE ☐ Delete ☐ Change TITLE ☐ Addition NAME CANEJA, PABLO NAME STREET ADDRESS 7028 W 4 LANE STREET ADDRESS CITY-ST-ZIP HIALEAH FL 33014 CITY-ST-ZIP Delete TITLE TITLE ☐ Change ☐ Addition NAME MARTINEZ, MARIA A. NAME MARIA. A. MARTINEZ STREET ADDRESS 181 CRANDON BLVD, APT, 207 STREET ADDRESS 251 CRANDON BAYD, APT. 435 CITY-ST-ZIP KEY BISCAYNE FL 33149 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition CANEJA, ISABEL NAME NAME 7028 W 4 LANE STREET ADDRESS STREET ADDRESS HIALEAH FL 33014 CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition TITLE GARIFA, MIGUEL NAME NAME 91 TOT LOCHE STREET ADDRESS STREET ADDRESS HIALEAH FL 33010 CITY-ST-ZIP CITY-ST-ZIP

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 1.19. 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 eath; 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.

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