## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F03000003147

FILED Apr 27, 2007 Secretary of State

Entity Name: CUBAN AMERICAN NATIONAL FOUNDATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 1312 SW 27 AVENUE MIAMI, FL 33145 US **Current Mailing Address: New Mailing Address:** 1312 SW 27 AVENUE MIAMI, FL 33145 FEI Number: 59-2122621 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-MEDINA, ROLAND JR 2333 PONCE DE LEON BLVD SUITE 302 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: (X) Change ( ) Addition () Delete MAS SANTAS, JORGE MAS SANTOS, JORGE Name: Name: 1312 SW 27 AVENUE Address: 1312 SW 27 AVENUE Address: City-St-Zip: MIAMI, FL 33145 US City-St-Zip: MIAMI, FL 33145 US Title: VCD Title: ( ) Delete () Change () Addition DEL VALLE, CLARA M Name: Name: Address: 1312 SW 27 AVENUE Address: City-St-Zip: MIAMI, FL 33145 US City-St-Zip: Title: VCD () Delete Title: () Change () Addition GUTIERREZ, JUAN A Name: Name: Address: 1312 SW 27 AVENUE Address: City-St-Zip: MIAMI, FL 33145 US City-St-Zip: ( ) Delete Title: PD Title: () Change () Addition HERNANDEZ, FRANCISCO J Name: Name: Address: 1312 SW 27 AVENUE Address: City-St-Zip: MIAMI, FL 33145 US City-St-Zip: Title: VD () Delete Title: () Change () Addition MARTINEZ, MIGUEL A Name: Name: 1312 SW 27 AVENUE Address: Address: City-St-Zip: MIAMI, FL 33145 US City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: ROLAND SANCHEZ-MEDINA JR. AS 04/27/2007

MOREIRA, DOMINGO

1312 SW 27 AVENUE

MIAMI, FL 33145 US

Name:

Address:

City-St-Zip:

SANCHEZ-MEDINA JR., ROLAND

CORAL GABLES, FL 33134 US

2333 PONCE DE LEON BLVD, SUITE 302