

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004544

FILED
Jan 17, 2009
Secretary of State

Entity Name: CUBA STUDY GROUP, INC.

Current Principal Place of Business:

632 I STREET, SE
WASHINGTON, DC 20003 US

New Principal Place of Business:

Current Mailing Address:

611 PENNSYLVANIA AVE SE #208
WASHINGTON DC, FL 2008

New Mailing Address:

FEI Number: 65-1154598 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK INC.
11380 PROSPERITY FARMS RD., #221E
PALM BEACH GARDENS, FL 33410 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: MR. () Delete
Name: DE LA FE, ERNESTO
Address: 3314 DEVON COURT
City-St-Zip: MIAMI, FL 33133

Title: MR. () Delete
Name: SALADRIGAS, CARLOS
Address: 11000 S.W. 83 AVENUE
City-St-Zip: MIAMI, FL 33156

Title: D () Delete
Name: O'NAGHTEN, JUAN T
Address: 2950 S.W. 27 AVENUE, SUITE 300
City-St-Zip: MIAMI, FL 33133

Title: MR. () Delete
Name: SOSA, ENRIQUE
Address: 430 GRAND BAY DRIVE, SUITE 1002
City-St-Zip: KEY BISCAYNE, FL 33149

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MR. (X) Change () Addition
Name: PEREZ, LUIS
Address: 811 NORTH GREENWAY DRIVE
City-St-Zip: CORAL GABLES, FL 33134

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: TOMAS BILBAO

MR.

01/17/2009

Electronic Signature of Signing Officer or Director

Date