

2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Oct 08, 2007
Secretary of State

DOCUMENT# N02000002009

Entity Name: CUBAN AMERICAN NATIONAL ASSOCIATION, INC.**Current Principal Place of Business:**904 SW 23 AVE
MIAMI, FL 33135**New Principal Place of Business:****Current Mailing Address:**904 SW 23 AVE
MIAMI, FL 33135**New Mailing Address:****FEI Number:** 75-3045795**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**DEMETRIO J. PEREZ & ASSOCIATES, P.A.
904 SW 23 AVE
MIAMI, FL 33135 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:** D () Delete
Name: PENA, YUXIMI
Address: 904 SW 23 AVE
City-St-Zip: MIAMI, FL 33135**Title:** D () Delete
Name: ESPINOSA, ARMINDA
Address: 904 SW 23 AVE
City-St-Zip: MIAMI, FL 33135**Title:** D () Delete
Name: VASALLO, MARIA
Address: 904 SW 23 AVE
City-St-Zip: MIAMI, FL 33135**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** D (X) Change () Addition
Name: PEREZ, DEMETRIO J
Address: 904 SW 23 AVE
City-St-Zip: MIAMI, FL 33135**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: ARMINDA ESPINOSA

D

10/08/2007

Electronic Signature of Signing Officer or Director_____
Date