

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02755

FILED  
Mar 06, 2009  
Secretary of State

Entity Name: CUBAN THEATRE FOLKLORE HERITAGE, INC.

**Current Principal Place of Business:**

250 W. 25TH STREET  
MIAMI, FL 33010

**New Principal Place of Business:**

**Current Mailing Address:**

250 W. 25TH STREET  
MIAMI, FL 33010

**New Mailing Address:**

FEI Number: 59-2486581

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PINEIRO, ALBERTO J.  
250 WEST 25TH STREET  
MIAMI, FL 33010 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: PCMD ( ) Delete  
Name: PINEIRO, ALBERTO J.,  
Address: 250 WEST 25TH STREET  
City-St-Zip: HIALEAH, FL

Title: VPD ( ) Delete  
Name: CASTILLO, OSVALDO  
Address: 10364 SW 8 TERR  
City-St-Zip: MIAMI, FL 33174

Title: TD ( ) Delete  
Name: CABRERA, MIRSA M.,  
Address: 250 WEST 25TH STREET  
City-St-Zip: HIALEAH, FL

Title: V ( ) Delete  
Name: FUENTE, TONY D.  
Address: 1605 PENNSYLVANIA APT 401  
City-St-Zip: MIAMI BCH, FL

Title: SD ( ) Delete  
Name: HERRERA, TATYANA  
Address: 3801 SW 58 AVE  
City-St-Zip: FT. LAUDERDALE, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: VPD (X) Change ( ) Addition  
Name: PARDO, ELSA  
Address: 250 WEST 25TH STREET  
City-St-Zip: MIAMI, FL 33010

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: ALBERTO J PINEIRO

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03/06/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date