

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 18, 2005
Secretary of State**

DOCUMENT# N04000001589

Entity Name: THE ASSOCIATION FOR THE ADVANCEMENT OF THE AMERICAS, INC

Current Principal Place of Business:

3509 SW 113 PLACE
MIAMI, FL 33165

New Principal Place of Business:

Current Mailing Address:

3509 SW 113 PLACE
MIAMI, FL 33165

New Mailing Address:

FEI Number: 20-0760921 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

FERNANDEZ, ABDALA
3509 SW 113 PLACE
MIAMI, FL 33165 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: PD () Delete
Name: FERNANDEZ, ABDALA
Address: 3509 SW 113 PLACE
City-St-Zip: MIAMI, FL 33165

Title: TD () Delete
Name: LAURENT, FRESNEL
Address: 498 NW 165 STREET. #604D
City-St-Zip: MIAMI, FL 33169

Title: SVD () Delete
Name: SALEM, MICHAEL
Address: 6363 GAGE PLACE
City-St-Zip: MIAMI LAKES, FL 33014

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SVD (X) Change () Addition
Name: ESCARRA, RAYMUNDO F
Address: 2551 SW 2 ST
City-St-Zip: MIAMI, FL 33135

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ABDALA FERNANDEZ

PD

04/18/2005

Electronic Signature of Signing Officer or Director

_____ Date