


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008 08:00 AM
Secretary of State

DOCUMENT # N04000005368	
1. Entity Name LA UNIDAD CUBANA, INC.	

Principal Place of Business 970 S.W. 1ST SREET 302 MIAMI, FL 33130	Mailing Address P.O. BOX 1973 MIAMI, FL 33135
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04252008 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0283460	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FIGUEROA, LUIS A
 815 PONCE DE LEON BLVD STE 200
 CORAL GABLES, FL 33134

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

1100000937985
 05/27/08-80072-005 \$61.25

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ALONSO, JUAN F 970 SW 1ST ST. #302 MIAMI, FL 33130
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ENCINOSA, PEDRO 2252 SW 105 CT MIAMI, FL 33165
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:  TREASURY Date: 0/26/08 (308) 545 7600 Daytime Phone #