

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006774

FILED  
Apr 09, 2006  
Secretary of State

**Entity Name:** CUBAN AMERICANS FOR CHANGE, INC.

**Current Principal Place of Business:**

8877 COLLINS AVE.  
808  
SURFSIDE, FL 33154

**New Principal Place of Business:**

**Current Mailing Address:**

8877 COLLINS AVE.  
808  
SURFSIDE, FL 33154

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

CRUZ, AMAURY  
1688 WEST AVE. APT. 602  
MIAMI BEACH  
FL, FL 33139 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: P ( ) Delete  
Name: BENES, BERNARDO  
Address: 8877 COLLINS AVENUE, APT. 808  
City-St-Zip: SURFSIDE, FL 33154

Title: V ( ) Delete  
Name: CRUZ, AMAURY  
Address: 1688 WEST AVE. APT. 602  
City-St-Zip: MIAMI BEACH, FL 33139

Title: V ( ) Delete  
Name: CANIZARES, LORENZO  
Address: 6650A TERRACE WAY  
City-St-Zip: HARRISBURG, PA 17111 70

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

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 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: /AMAURY CRUZ/

VJP

04/09/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date