

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007420

FILED  
Apr 18, 2007  
Secretary of State

**Entity Name:** MISS CUBAN AMERICAN U.S.A. AND MISS TEEN CUBAN AMERICAN U.S.A., INC.

**Current Principal Place of Business:**

12239 SW 14TH LANE  
APT. 3110  
MIAMI, FL 33184

**New Principal Place of Business:**

**Current Mailing Address:**

12239 SW 14TH LANE  
APT. 3110  
MIAMI, FL 33184

**New Mailing Address:**

**FEI Number:** 11-3793062      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

MARIELENA, PRINCIGALLI  
7365 S W 8 STREET  
MIAMI, FL 33144 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: PRINCIGALLI, GLORIA ESTHER  
Address: 12239 SW 14TH LANE, APT 3110  
City-St-Zip: MIAMI, FL 33184

Title: D ( ) Delete  
Name: INCHAUSTI, NATY  
Address: 2095 SW 139 AVE  
City-St-Zip: MIAMI, FL 33184

Title: D ( ) Delete  
Name: PEREZ, ERICK  
Address: 1800 NW 24 AVE  
City-St-Zip: MIAMI, FL 33142

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

Title: PD (X) Change ( ) Addition  
Name: PRINCIGALLI, MARIO  
Address: 12239 SW 14TH LANE, APT 3110  
City-St-Zip: MIAMI, FL 33184

Title: VD (X) Change ( ) Addition  
Name: PRINCIGALLI, GLORIA E  
Address: 12239SW 14 LN # 3110  
City-St-Zip: MIAMI, FL 33184

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

Title: D ( ) Change (X) Addition  
Name: ALONSO, RAMON  
Address: 903 SW 1 ST.  
City-St-Zip: MIAMI, FL 33125

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: MARIO PRINCIGALLI

PD

04/18/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date