2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2009
Secretary of State

DOCUMENT# N05000008664

Entity Name: ORGANIZACION DE PRODUCTORES AGROPECUARIOS DE CUBA, INC.

Current Principal Place of Business:

7811 CORAL WAY
133
MIAMI, FL 33155 US

New Principal Place of Business:

Current Mailing Address:

7811 CORAL WAY
133
MIAMI, FL 33155 US

New Mailing Address:

FEI Number: 56-2589146 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

DIAZ, ANTONIO C CPA
7811 CORAL WAY
SUITE 133
MIAMI, FL 33155 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: CAPOTE, FAUSTO
Address: 600 BILTMORE WAY, STE. 920
City-St-Zip: CORAL GABLES, FL 33134 US

Title: D ( ) Delete
Name: GARCIA, EDUARDO
Address: 7811 CORAL WAY- SUITE 133
City-St-Zip: MIAMI, FL 33155 US

Title: VD ( ) Delete
Name: DE LA GUARDIA, LIBRADO
Address: 7331 SW 100TH CT.
City-St-Zip: MIAMI, FL 33173 US

Title: ST ( ) Delete
Name: BELTRAN, CONCHITA
Address: 7811 CORAL WAY - SUITE 133
City-St-Zip: MIAMI, FL 33155 US

Title: TD ( ) Delete
Name: DIAZ, ANTONIO C
Address: 7811 CORAL WAY - SUITE 133
City-St-Zip: MIAMI, FL 33155 US

Title: D ( ) Delete
Name: LOPEZ, MANUEL
Address: 7811 CORAL WAY - SUITE 133
City-St-Zip: MIAMI, FL 33155 US

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:

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: ANTONIO C DIAZ TD 04/28/2009

Electronic Signature of Signing Officer or Director — Date