

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010707

FILED  
Apr 27, 2010  
Secretary of State

**Entity Name:** CUDA MEDICAL BOOSTER CLUB, INC.

**Current Principal Place of Business:**

17520 SW 140 COURT  
MIAMI, FL 33177

**New Principal Place of Business:**

**Current Mailing Address:**

17520 SW 140 COURT  
MIAMI, FL 33177

**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:**

CONDE, DULCE  
17520 SW 140 COURT  
MIAMI, FL 33177 US

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

LAING, ANGELLA  
8510 SW 102 AVENUE  
MIAMI, FL 33173 US

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: ANGELLA LAING

04/27/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: BROWN, CLAUDETTE M  
Address: 12295 SW 133 CT  
City-St-Zip: MIAMI, FL 33186

Title: VP  
Name: GONZALEZ, MARIA  
Address: 17520 SW 140 COURT  
City-St-Zip: MIAMI, FL 33177

Title: S  
Name: PINO, PEGGY  
Address: 5933 SW 147 PLACE  
City-St-Zip: MIAMI, FL 33193

Title: T  
Name: LAING, ANGELLA  
Address: 8510 SW SW 102 AVENUE  
City-St-Zip: MIAMI, FL 33173

I hereby 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 all other like empowered.

SIGNATURE: ANGELLA LAING

T

04/27/2010

Electronic Signature of Signing Officer or Director

Date