## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000000420

FILED Apr 12, 2007 Secretary of State

Entity Name: CUBAN AMERICAN CULTURAL ARTS SOCIETY, INC.

**Current Principal Place of Business: New Principal Place of Business:** 8240 LAKE CYPRESS RD. LAKE WORTH, FL 33467 **Current Mailing Address: New Mailing Address:** 8240 LAKE CYPRESS RD. LAKE WORTH, FL 33467 FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: TOBIN & REYES, P.A TOBIN & REYES, P.A 7251 W. PALMETTO PARK RD., SUITE 205 5355 TOWN CENTER ROAD BOCA RATON, FL 33433 SUITE 204 BOCA RATON, FL 33486 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: RICARDO REYES 04/12/2007 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition REYES, MIGUEL A Name: Name: 8240 LAKE CYPRESS RD. Address: Address: City-St-Zip: LAKE WORTH, FL 33467 City-St-Zip: Title: () Delete Title: () Change () Addition Name: PRIEDE, ERNESTO A Name: Address: 8240 LAKE CYPRESS RD. Address: City-St-Zip: LAKE WORTH, FL 33467 City-St-Zip: Title: () Delete Title: () Change () Addition AVELLANA, JORGE Name: Name: 8240 LAKE CYPRESS RD. Address: Address: City-St-Zip: LAKE WORTH, FL 33467 City-St-Zip: Title: ( ) Delete Title: () Change () Addition MONTELL, FRANK Name: Name: Address: 8240 LAKE CYPRESS RD. Address: City-St-Zip: LAKE WORTH, FL 33467 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: MIGUEL REYES D 04/12/2007