

**2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Oct 27, 2008**  
**Secretary of State**

DOCUMENT# N06000001296

**Entity Name:** MUNICIPIO DE BARACOA EN EL EXILIO, INC.**Current Principal Place of Business:**13345 SW 36 ST  
MIAMI, FL 33175**New Principal Place of Business:**12930 SW 49TH TERRACE  
MIAMI, FL 33175**Current Mailing Address:**13345 SW 36 ST  
MIAMI, FL 33175**New Mailing Address:**12930 SW 49TH TERRACE  
MIAMI, FL 33175**FEI Number:****FEI Number Applied For ( )****FEI Number Not Applicable (X)****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**RODRIGUEZ, JUAN J  
1111 SW 93 PL  
MIAMI, FL 33174 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: ROBAS, ANTONIO  
Address: 11133 NW FLAGLER TERR.  
City-St-Zip: MIAMI, FL 33172Title: D ( ) Delete  
Name: GARCIA, ILEANA  
Address: 5230 SW 5 TERR  
City-St-Zip: MIAMI, FL 33134Title: D ( ) Delete  
Name: ESCACENA, EDUARDO  
Address: 1142 SW 138 PL  
City-St-Zip: MIAMI, FL 33184Title: D ( ) Delete  
Name: RODRIGUEZ, JUAN J  
Address: 1111 SW 93 PL  
City-St-Zip: MIAMI, FL 33174Title: D (X) Delete  
Name: OSLE, DULCE  
Address: 201 - 178 DR # 210  
City-St-Zip: SUNNY ISLE BEACH, FL 33160**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: D/T (X) Change ( ) Addition  
Name: DIAZ, CARIDAD  
Address: 12930 SW 49TH TERRACE  
City-St-Zip: MIAMI, FL 33175Title: S (X) Change ( ) Addition  
Name: ABELLA, RUBEN  
Address: 1111 SW 93 PLACE  
City-St-Zip: MIAMI, FL 33174Title: ( ) 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: ON FILE

PTE.

10/27/2008

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