

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000010350

FILED
Jul 09, 2008
Secretary of State

Entity Name: AFRO-CUBAN CHILDREN AESTHETIC FOUNDATION, INC.

Current Principal Place of Business:

7060 NW 177 STREET
APT 100
MIAMI, FL 33015

New Principal Place of Business:

Current Mailing Address:

7060 NW 177 STREET
APT 100
MIAMI, FL 33015

New Mailing Address:

FEI Number: 26-1294611 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

BASILIO, JOSE D
1414 NW 107 AVE
206
MIAMI, FL 33172 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: DR. HERRERA, VICTOR L
Address: 7060 NW 177 STREET
City-St-Zip: MIAMI, FL 33015

Title: D () Delete
Name: DR. HERRERA, MARTHA G
Address: 7060 NW 177 STREET
City-St-Zip: MIAMI, FL 33015

Title: D () Delete
Name: FERNANDEZ, IRAIDA
Address: 1414 NW 107 AVE SUITE 206
City-St-Zip: MIAMI, FL 33172

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:

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: VICTOR L. HERRERA

DR.

07/09/2008

Electronic Signature of Signing Officer or Director

Date